# Public Procurement System and Effectiveness of Health Care Service Delivery in Uganda: A Case Study of Selected Rural Health Centers in Wakiso District

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Keywords: Procurement, Public Procurement System

#### Introduction

The study was undertaken due to the fact that health care service delivery is important for people's lives worldwide especially in Wakiso District Uganda. One of the Health workers at EPI commented that "A country without good Health care service delivery systems is treated as a failed state". Therefore, the recommendations drawn from this study shall be used by the Uganda Government in improving its Health care service delivery. Wakiso District which has many Health care Center IIIs has had complaints from citizens about the Health care services offered by Nakawuka, Namulonge, Mende and EPI Health Centre IIIs. Some of the Health centre IIIs are inaccessible considered the case for EPI Health Center whose remoteness made its residents raise a lot of complaints against its staff.

#### **Study objectives**

The study was guided by the following specific objectives:

- To assess the effectiveness of Health care service delivery in selected rural Health Centre IIIs in Wakiso District
- To analyze the contribution of logistics management on the effectiveness of Health care service delivery for selected rural Health Center IIIs in Wakiso District
- iii. To assess the relationship between procurement supplies and effectiveness of selected rural Health centre IIIs in Wakiso District.
- To assess the relationship between public funding and the effectiveness of selected rural Health Centre IIIs in Wakiso District.

# Methodology

A sample of 301 respondents was used; a cross-sectional design was followed when carrying field research. Although several methods were applied, the major one was the survey method using a specially designed questionnaire

# **Key findings**

The findings were; (a) all medicines for HCIII are procured by NMS. How much of the medicines are procured depends on the

funding (r (301) = .586, PL0.01). Secondly, since medicines are not procured directly by HC IIIs finding should be available to cater for logistics (i.e. storage and distribution) of the same to HC III through distinct and HC IVs r (301) .562P (0.01).

Thirdly, it was found that timely distribution and proper storage of medicines enhanced service delivery (r (301) = 593, P<0.01). Fourthly, Public Procurement System was funded to affect Health and the related aspects of finding and logistics contributed 57% to making Health Care service delivery at the HC II's effective. Although this was a fair contribution, given the fact that there were still many complaints at out the Public Procurement System the study proposed the Procurement Inventory Logistic Management procurement model (PILM).

#### Recommendations

The study recommends that the policy of Health sector management at H/C IIIs should be revised to incorporate the private partner by contracting/outstanding the non-core Health activities/services to the private consultant, A review in the budget allocations in the PHC Budget allocations for Drugs and medicines and non-wage funds. In addition, the drug budget should also be divided equally with 50% going to NMS and 50% going to JMS through DHO's Office. The policy of free Health care delivery to at least has a minimum uniform fee paid by the patients to the H/C accounts in order to boost the limited

funding challenge.

The PILM model should be adopted by the Ministry of Health for the procurement of medicals and supplies to improve Health care service delivery by 10 % in the rural Health centre III management and also improve the quality of data and Health care by the private consultant.

# **Key references**

Ministry of Health, (2017)

Musoke & Sodeman (2016),

PPDA Act (2008)