



**GHANA HEALTH SECTOR
2023 PROGRAMME OF WORK**

MINISTRY OF HEALTH

ACRONYMS

ABFA	Annual Budget Funding Amount
APOW	Annual Programme of Work
CDC	Centre for Disease Control
CHAG	Christian Health Association Ghana
CLIP	Clinical Laboratory Improvement Project
CLSR	Centre for Laboratory Services and Research
CPMR	Centre for Plant Medicine Research
DEXA	Dual Energy X-ray Absorptiometry
DHIMS	District Health Information Management Systems
EHSP	Essential Health Services Package
GHS	Ghana Health Service
GoG	Government of Ghana
HeFRA	Health Facilities Regulatory Agency
HFS	Health Finance Strategy
HIV	Human Immune Virus
HO	Health Objective
HSMTDP	Health Sector Medium Term Development Plan
IGF	Internally Generated Funds
MDAs	Ministries, Departments and Agencies
MoFFA	Mortuaries and Funerals Facilities Agencies
MoH	Ministry of Health
MoU	Memorandum of Understanding
MTCT	Mother to Child Transmission
NCD	Non-Communicable Disease
NHIA	National Health Insurance Authority
NHIS	National Health Insurance Scheme
NoP	Network of Practice
PforR	Performance for Results
PHC	Primary Health Care
PMTCT	Prevention of Mother to Child Transmission
SDGs	Sustainable Development Goals
UHC	Universal Health Coverage
VFM	Value for Money
WACPS	West African College of Physicians and Surgeons

Table of Contents

CHAPTER ONE.....	5
1.0 INTRODUCTION.....	5
1.1 Vision, Goal and Health Policy objectives.....	5
CHAPTER TWO.....	6
2.0 2022 PERFORMANCE.....	6
2.1 Summary of Key Achievements in 2022.....	6
2.2 2022 Budget Performance.....	12
2.2.1 2022 Approved Budget.....	12
2.2.1 Challenges.....	14
CHAPTER THREE.....	20
3.0 PRIORITY AREAS FOR 2023.....	20
CHAPTER FOUR.....	22
4.0 2023 HEALTH SECTOR PROGRAMME BASED BUDGET.....	22
CHAPTER FIVE.....	26
5.0 PERFORMANCE ASSESSMENT FRAMEWORK.....	26
5.1 Sector Monitoring and Evaluation.....	26
6.2 Milestones (M&E to provide updated milestones).....	57
Annex 1: 2023 Budget Allocation by Agency.....	59
Annex 2 Action Plan.....	61
Annex 3 Capital Investment Plan.....	78
Annex 4 Procurement Plan.....	86
Annex 5b Year on Year budget change.....	89
Annex 5c: Budget Annual % Change by Economic classification.....	89

FOREWORD



The 2023 Annual Programme of Work (APOW) represents the second year of implementation of the Health Sector Medium-Term Development Plan (HSMTDP 2022-2025). The focus of the health sector HSMTDP is to contribute towards the attainment of the UHC in Ghana which is defined as increasing access to quality essential healthcare and population-based services for all people living in Ghana by 2030.

In 2022, significant progress was made in advancing the Ministries' efforts towards achieving Universal Health Coverage (UHC) by 2030. This progress was marked by the development of several crucial policies, including the Health Financing Strategy, the Referral Policy, and the Essential health service package, among others. In addition, various health infrastructure projects were undertaken to enhance healthcare accessibility. These projects include the commissioning of the Konongo District hospital, treatment centers at Kumasi South, Aflao, Elubo, Keta, Dodowa, Adaklu, and the Fevers Unit at Korlebu Teaching Hospital, all aimed at improving healthcare delivery.

In 2023, the health sector will continue its efforts to improve access to primary health care services at the lower level by putting in place the necessary structures for implementing the Network of Practice Concept (NoP) and completing work on the essential health services package for implementation. Furthermore, the Ministry of Health will develop and review policies and strategies to improve its oversight function and strengthen the Agencies' mandate.

To address the challenges associated with resource mobilisation, the Ministry will intensify its resource mobilisation efforts by collaborating with the Ministry of Finance, Parliament, and development partners for the approval of loans to support the implementation of the Ghana Primary Health Care Investment Programme for Results (PforR) and the Additional Financing for COVID-19. Additionally, efforts will be made to explore new funding sources, such as the private sector.

With the passage of the Vaccine Act, the Ministry will work with the Office of the President to establish the Ghana National Vaccine Institute. In addition, the Ministry will work with partners to ensure the passage of the Health Security Act to help strengthen the management of emergencies in Ghana. The Ministry will continue to implement the proven interventions of strengthening surveillance systems and education, risk communication, case management and containment, testing and laboratory services, to ensure early detection and management of future pandemics and uptake of COVID-19 vaccination program towards the herd immunity target.

The Ministry will keep working closely with its Agencies, Development Partners, and key stakeholders to sustain the progress made so far and push towards the attainment of Universal Health Coverage (UHC) by 2030. I, therefore, urge all to support the 2023 Program of Work to ensure effective implementation.


KWAKU AGYEMAN-MANU (MP)
Minister for Health

CHAPTER ONE

1.0 INTRODUCTION

The Annual Programme of Work (APOW) aims at achieving the health-related Sustainable Development Goals (SDGs) through Governments development priorities of attaining Universal Health Coverage (UHC) for all people living in Ghana by the year 2030.

The year 2022 continued to face global uncertainties such as COVID-19 pandemic, commodity prices, impact of the Russia-Ukraine war and inflation that slowed down growth in many economies These affected Ghana's macroeconomic environment significantly and the 2022 budget projections. Both global and domestic shocks had a negative effect on the performance of the Ministry in 2022. In spite of these challenges, the Ministry was able to achieve some of its agreed programs and activities.

In consolidating the gains made so far, the 2023 Budget Guidelines articulated clear priorities for Ministries, Departments and Agencies (MDAs) to develop plans and budgets to reflect on Governments priorities to stem down the challenges being encountered to ensure that Governments priorities outlined in the medium-term are achieved

In 2023, the Ministry will continue to implement key programs and activities in the National Health Policy, the Universal Health Coverage Roadmap, the Health Financing Strategy, , the Human Resource for Health Policy and Strategy, Non-Communicable Disease (NCD) Policy and Strategy, reorganization of the Primary Health Care at the District level through the Network of Practice, improve resource mobilization mechanisms, the COVID-19 vaccination and proven interventions, consolidating on existing achievements among others to ensure that the health of the population is protected as captured in the Health Sector Medium Term Development Plan. The Ministry will also leverage on the opportunities of the African Continental Free Trade to promote Ghana as a health hub in Africa through the Health Tourism Agenda of the Government.

The 2023 APOW outlines the Ministry's performance for the previous year, key priorities, planned activities and budgetary needs. The document will continue to use the Programme Based Budget (PBB) structure. As a result, all priorities are linked to the health objectives and related operations, expected outputs, and output indicators.

1.1 Vision, Goal and Health Policy objectives

Vision

All people in Ghana have timely access to high-quality health services irrespective of ability to pay at the point to use.

Goal

Increased access to quality essential health care and population-based services for all by 2030

Policy objectives

- Universal access to better and efficiently managed quality healthcare services
- Reduce avoidable maternal, adolescent and child deaths and disabilities
- Increase access to responsive clinical and public health emergency services

CHAPTER TWO

2.0 2022 PERFORMANCE

2.1 Summary of Key Achievements in 2022

Management and Administration

As part of the Ministry's oversight responsibilities, a number of policies were developed and disseminated in 2022. The National Policy on Non-Communicable Disease was developed to ensure that the burden of NCDs is reduced to the barest minimum, the National Food Safety Policy and Strategic Action Plan (2022 – 2026) developed to assure safe and suitable food for all consumers, National Medicine Pricing Strategy to help control and regulate the pricing of pharmaceutical products in Ghana and the National Medical Oxygen Policy to increase access to essential medical oxygen for all. In addition to improve the quality-of-service delivery, the Essential Health Services Package (EHSP) was developed to ensure cost-effective and high-impact essential health services and interventions are made universally accessible to all persons living in Ghana. In 2022 the following were disseminated: Universal Health Coverage Roadmap (2020-2030), the National Health Policy (2020) and HSMTDP (2022-2025). Several existing policies are being reviewed, and some new ones are also in various stages of drafting. Among these are the Health Financing Strategy, National Patient Referral Policy and Guidelines, Medical Tourism Policy, Health Security Policy, National Medical Devices Policy, Health Information System Strategy (2022-2025), National Health Infrastructure Strategy, Health Sector Gender Policy, and Policy Guidelines for COVID-19 Management in Community Pharmacies.

As of September 2022, a total of 4,126, health professionals had applied for travel authorization to leave the country. To ensure that the country benefits from this migration, the Ministry is negotiating a Memorandum of Understanding (MoU) with the Government of the United Kingdom to regulate migration of Ghanaian health workers to the United Kingdom. In addition, as part of the bilateral agreement between the Governments of Ghana and Barbados, 122 nurses were sent to Barbados.

As part of resource mobilization efforts, the Ministry collaborating with the Ministry of Finance and the World Bank to secure a USD181 million loan under the Ghana Primary Health Care Investment Program for Results (Performance for Results (PforR) Program) to support lower-level service delivery. All the necessary arrangement has been completed and currently awaiting Parliamentary approval.

Under the Global Fund fight against TB, HIV/AIDS and Malaria, the Ministry has secured an amount of USD115.4 million under the COVID-19 response mechanism out of the USD151.4

million requested. We have also secured an amount of USD265 million as part of the country's grant to respond to TB, HIV/AIDS and Malaria and to support health system strengthening.

The Ministry also secured approval for a new funding window of USD10.8 million under GAVI dubbed Program Support Rationale that aims to ensure reaching the unreached children and supporting country programmatic and financial sustainability and USD60.6 million third Additional Financing under the Ghana COVID-19 Emergency Preparedness and Response Program.

Service Delivery

The national effort to improve specialized services is ongoing. Cardiac Angiography and Dual Energy X-ray Absorptiometry (DEXA) services have been added to Komfo Anokye Teaching Hospital. The Tamale Teaching Hospital established a Radiotherapy Center with philanthropic funding to improve Oncology services in the northern part of the country, as well as cardiology, colposcopy, urogynecology, endoscopy, and CT-Scan services. In addition to CT-Scan and endoscopy services, the Ho Teaching Hospital has added a Mobile Clinic Van to support outreach services.

The Ghana Health Service is reorganizing service delivery at the lower level through the Network of Practice concept, which makes the Health Centre the hub of service delivery, as part of the Universal Health Coverage Roadmap target of strengthening primary health care services at the lower levels. So far, guidelines for the Network of Practice's operation have been developed, and stakeholder consultation is ongoing.

Malaria remains one of the top ten killer diseases in Ghana. Ghana Health Service, in collaboration with Zoomlion Ghana Limited, developed and implemented an application (LSM Implement app) used for mapping and treating mosquito breeding sites in districts as part of the government's efforts to eradicate malaria.

To improve adolescent health and counselling services for the youth, the Ghana Health Service developed a mobile application called **"You Must Know (YMK) Mobile App"** to address adolescent and youth challenges online, and facilitate referral for further needs or specialized care.

In support of the country's strife to improve access to safe blood and blood products, the National Blood Service (NBS), in collaboration with the Food and Drugs Authority, launched the National Haemovigilance Framework and Guidelines for Haemovigilance in Ghana as a way of assuring safe blood transfusions. Also, to enhance the quality and safety of collected blood units, the National Strategy for Screening Donated Blood and Immuno-Haematological Testing was launched. This will improve the National Algorithm for Screening Donated Blood. The NBS continued collaborating with Zipline Drone Services to mobilize and distribute blood products via drones to hard-to-reach facilities.

One of the pillars of the Health Sector Medium Term Development Plan is quality of care. In order to achieve this, the Christian Health Association of Ghana has subscribed to the SafeCare certification in its facilities, which range from level one to level four. To deal with emerging non-communicable diseases, the Ministry has disseminated the Non-Communicable Diseases Policy. As part of the policy's implementation, the Christian Health Association of Ghana is conducting research dubbed "Akoma Pa" in 85 facilities across six regions, with a target enrollment of 70,000 clients. The Centre for Plant Medicine Research (CPMR) also contributed to the advancement of traditional medicines by analyzing 334 herbal products and conducting toxicity studies.

Table 1: Performance of Health Service Indicators in 2022

Service Indicators	Jan - Jun 2022	Jan - Jun 2021
ANC Coverage	77%	81%
% Registrants making 4th Visits	85%	85%
IPT3 Coverage	61%	55%
Total Deliveries	398,764	403,948
PNC Coverage	69.40%	73.80%
Still birth rate	11.40%	11.90%
Institutional Neonatal Mortality Rate	7.20%	7.70%
Institutional Maternal Mortality Ratio	111.7	113.8
Infant Mortality Rate	8.10%	8.70%
Under 5 mortality rate	9.6	9.6
Penta 3 Coverage	97.60%	99.00%
Yellow Fever - Children Vaccinated	96.20%	96.30%
Treatment Outcomes Evaluation among New and Relapse TB patients	87.00%	88.20%
Diabetes incidence rate	0.73%	0.75%
Hypertension incidence rate	2.48%	2.22%
Family planning acceptor rate	34.60%	34.90%

Human Resource for Health Development

Human Resources continue to be an important pillar in the Sector's pursuit of Universal Health Coverage (UHC). Over the years, the Ministry has worked to train specialists in order to improve the quality of care. To that end, the Ghana College of Physicians and Surgeons developed and submitted guidelines for postgraduate training to cabinet in 2022. The Ghana College of Nurses and Midwives introduced specialty training in 22 areas and enrolled 643 trainees.

As part of its plans to decentralize training, the Ghana College of Physicians and Surgeons signed a Memorandum of Understanding with the Ghana Health Service and some private facilities for accreditation for postgraduate training. The West African College of Physicians and Surgeons (WACPS) also recognized the Tamale Teaching Hospital as a postgraduate training facility.

Health Sector Regulation

Health regulation continues to be a major function of the Ministry in order to improve quality of care and protect public safety. To strengthen the mandate of health regulatory agencies, the Ghana Psychology Council developed a Legislative Instrument for Part V of the Health Profession Regulatory Act, 2013 (Act 857) and the Health Facilities Regulatory Agency for Health Institutions and Facilities Act, 2011. (Act 829).

To decentralize operations, the Health Facilities Regulatory Agency developed a four-year strategic plan and opened two regional offices in Sefwi-Wiawso and Bolgatanga. To enforce practice standards, the Medical and Dental Council created and published a Scope of Practice document.

The Centre for Laboratory Services and Research (CLSR) reaccredited the Food and Drugs Authority Lab for ISO 17025:2017 testing scope to 58 products for medicines, medical devices, cosmetics, household chemical substances, and food, as well as the Food and Drugs Authority's technical and administrative operations to ISO9001:2015.

The Food and Drugs Authority launched the National Food Safety Policy, the National Food Safety Emergency Response Plan Committee, an anti-drugs music video dubbed "Daabi" that received 36,528 views three months after its release, and the "no registration no clearance policy" as part of efforts to reduce congestion at the Tema port.

The EU German Development Agency (GIZ) is assisting the Food and Drugs Authority in vaccine manufacturing as part of the preparations for the establishment of the National Vaccine Institute. The Food and Drugs Authority signed a Memorandum of Understanding with the Rwanda Food and Drugs Authority to achieve Maturity Level 3 and collaborate on mRNA vaccine manufacturing as part of international collaboration. Ghana through the FDA was awarded WHO Framework Convention on Tobacco Control (FCTC) Project 2030 to develop and implement national tobacco control strategy, strengthen inter-agency coordination, facilitate revision of the smoke free policy, implementation, and enforcement on the ban on tobacco advertisement.

The Pharmacy Council has launched the National Electronic Pharmacy Platform for the deployment of electronic pharmacy services to improve access to medicines and quality pharmaceutical care in the area of pharmacy practice regulation.

Health Infrastructure

The Ministry completed the following projects in 2022: the construction of CHPS Compounds at Debiso, Tiawia, and Nsutam, a district hospital at Konongo, treatment centers at Kumasi South, Aflao, Elubo, Keta, Sewua, Dodowa, Adaklu, the Fevers Unit, Mechanical Engineering and Plumbing (MEP) and the Covid-19 Isolation Centre at Korle Bu.

Projects such as the construction and equipping of five district hospitals at Osiem, Assin Kushea, and Kutre, a 40-bed hospital at Dormaa Akwamu, and the upgrade of the Wamfie Polyclinic to a 60-bed district hospital support the government's drive to increase access and improve quality of care. Furthermore, construction of three district hospitals in Ayensuano,

Offinso, and Effiduase is proceeding apace. Work on the Maternity Blocks at Tafo and Kumasi South Hospitals, as well as the residential facility at Abrepo for Kumasi South Hospital, is also ongoing. The Ministry is also supplying and installing medical equipment for eight (8) selected district hospitals, for which it has received approval and completed Value for Money (VFM) audits.

The construction of the following projects is expected to be completed by December 2022:

- the construction of a Regional Hospital in Sewua,
- one (1) District Hospital, and five (5) polyclinics in the Western Region by Orio in Akontombra, Nsuaem, Elubo, Wassa Dunkwa, Bogoso, and Mpochor.
- Expansion and equipping of four selected facilities projects in Aburi (Kom), Tetteh Quarshie, Kibi, and Atobie,
- Bolgatanga Regional Hospital Phase II, and
- Treatment and holding centers in Pantang, Cape Coast, Goaso, Asawinso, and Zebilla.

Annex 7 has details of 2022 project at various levels of completion.

COVID-19 Update

As of 12th February 2023, the total number of confirmed COVID-19 cases was 171,153 with 10 active cases and 1,462 deaths. Since the outbreak of COVID-19, a total of 2,529,238 tests have been conducted with a positivity rate remaining low at 6.8.

Category	No. of cases	Recovered/Discharged	Severe	Critical	Dead	Active
Routine Surveillance	62,307	161,993	0	0	1,462	10
Enhanced Contact Tracing	101,157					
International travellers (KIA)	7,689	7,688				
Total	171,153	169,681	0	0	1,462	10

Surveillance Type	Total no. Tested	Total no. positive	Positivity rate
Routine Surveillance	504,538	62,307	12.3
Enhanced Contact Tracing	1,141,714	101,157	8.9
International travelers (KIA)	882,986	7,689	0.9
Total	2,529,238	171,153	6.8

Vaccination:

The Ministry has a vision of vaccinating the entire population. However, it has an initial target of 18.2m persons segmented by population groups and geography excluding children <15y and pregnant women. The vaccine delivery strategy includes static, outreach, mobile, campout or combination.

Table 3 Persons receiving one dose

Targeted Population for vaccination (15 years and above)	18,200,000
Persons receiving at least 1 dose	12,966,666
% of one dose against targeted population	71.1
% of one dose against total population	40.8

Table 4 shows details of Persons fully vaccinated

Targeted population for vaccination (15 years and above)	18,200,000
Persons fully vaccinated	9,938,786
% of fully vaccinated against the targeted population	54.5
% of fully vaccinated against the total population	31.3

Persons receiving 1st Booster dose – **3,765,104**.

Table 5: Summary of COVID-19 Vaccines received in Ghana as of 15th February 2023

Vaccine Brand Name	Sum of Quantity	Prop (%)	Doses Distributed	Doses Available
AstraZeneca	12,971,470	37.0%	12,971,470	-
Janssen	9,840,050	28.0%	6,907,250	2,932,800
Moderna	1,229,620	3.5%	1,229,620	-
Pfizer-BioNTech	11,036,658	31.4%	10,455,168	581,490
Sputnik - V	21,000	0.1%	21,000	-
Grand Total	35,098,798	100.0%	31,584,508	3,514,290

Table 6: Proportion of COVID-19 Vaccines by Source

Source of Vaccine	Quantity received	Prop (%)
COVAX	23,255,550	66.3%
AVATT/AU/WB	6,916,800	19.7%
Bilateral	4,926,448	14.0%
Grand Total	35,098,798	100.0%

National Health Insurance

In 2022, a series of activities to increase membership enrolment were carried out in accordance with the National Health Insurance Authority's goal of achieving UHC by 2030. As of September 30, 2022, there are 15.5 million active members, representing 49.3% of Ghana's population. Since its nationwide rollout, the mobile renewal system has improved the National Health Insurance Scheme's re-enrolment fortunes, with a total of 23.9 million mobile renewals from January 2019 to August 2022. The National Health Insurance Authority (NHIA) is developing a self-enrolment mobile application that will allow Ghana Card holders to self-enroll in the scheme, which is expected to be released by the end of 2022.

The National Health Insurance Authority improved its claims management processes at all four Claims Processing Centres, with an emphasis on e-claims and paperless systems. 85% of providers have received E-claims and Claim-it application training, with the remaining 15% expected to receive training by the end of 2022.

2.2 2022 Budget Performance

2.2.1 2022 Approved Budget

A total of GHC10.9b was approved for the Ministry of Health in the year 2022. However, the midterm budget review revised the 2022 budget downwards to GHC10.7b. As per the revised budget, GoG is the major source of funds for the sector and takes up 60.13% of the total budget. This is followed by IGF 27.44%, Donor 12.14% and ABFA 0.30%. The table 7 shows the details of the revised budget.

Table 7: 2022 Revised Budget

Source of Funds	Compensation of Employees	Goods and Services	Capex	Total	% share
GoG	6,165,200,000	186,810,116	109,015,600	6,461,025,716	60.13%
IGF	407,821,000	2,162,824,162	377,483,000	2,948,128,162	27.44%
Donor		78,482,000	1,225,734,000	1,304,216,000	12.14%
ABFA			32,424,000	32,424,000	0.30%
TOTAL	6,573,021,000	2,428,116,278	1,744,656,600	10,745,793,878	

Source: Revised Expenditure Ceiling for 2022

2.2.2 Budget Allotment Ceiling

The Ministry received a budget allotment ceiling of GHC6.2b out of the GHC6.4b which constitutes 96.3% of the approved budget. Whereas 100% compensation budget was allotted, only 6.79% of the goods & services budget was allotted to support service delivery. The low release of Goods & Service budget has become perennial which requires further dialogue with

the Ministry of Finance to ensure that the Ministry and Agencies receive the needed funds to support their planned activities and projects to be able to meet the agreed targets. The table 8 below shows the details of the budget allotment ceiling.

Table 8: 2022 GoG Revised Budget vs Budget Allotment Ceiling

Item	Revised GoG Budget	Total Allotment	Execution
COMPENSATION	6,165,200,000	6,165,200,000	100.00%
GOODS & SERVICES	186,810,116	12,693,182	6.79%
CAPEX (GOG & ABFA)	109,015,600	44,219,811	40.56%
TOTAL	6,461,025,716	6,222,112,994	96.30%

Source: Implementation of Budget Allotment Ceilings - Quarter 1-4 2022.

2.2.3 Actual Expenditure as at September 2022

The table 9 below shows the details of actual budget expenditure as at September 2022. GoG remains the major financier of the sector comprising GHC5.4b representing 84.42% of the total health expenditure. Out of the total GoG expenditure, compensation of employees takes up 84.02%, Goods & Service and Capex constitutes 0.15% and 0.25% respectively.

IGF which is the second highest financier of the budget takes up GHC1.45b representing 49.34% of the total budget expenditure. Out of this, Goods & Service is 40.21% which supports service delivery. As per the table below, there is a huge difference between the projection, collection and use of IGF. As at the end of the third quarter, only 32.35% of the projected Goods & Services have been collected and used. This may be due to reporting issues or possible delay of National Health Insurance Scheme (NHIS) claim reimbursement.

Table 9: 2022 Budget Performance as at September 2022

Source of Fund	2022 Approved Budget	Allotment (Jan - Sept)	Actual Expenditure (Jan-Sept)	Execution Rate
GoG	6,461,025,716	5,058,329,485	5,454,108,801	84.42%
<i>Compensation</i>	<i>6,165,200,000</i>	<i>5,026,580,717</i>	<i>5,428,771,273</i>	<i>88.06%</i>
<i>Goods & Services</i>	<i>186,810,116</i>	<i>11,193,183</i>	<i>9,432,973</i>	<i>5.05%</i>
<i>Capex</i>	<i>109,015,600</i>	<i>20,555,586</i>	<i>15,904,555</i>	<i>14.59%</i>
IGF	2,948,128,162	1,659,024,169	1,454,585,458	49.34%
<i>Compensation</i>	<i>407,821,000</i>	<i>190,557,704</i>	<i>189,407,279</i>	<i>46.44%</i>
<i>Goods & Services</i>	<i>2,162,824,162</i>	<i>1,377,688,107</i>	<i>1,185,366,068</i>	<i>54.81%</i>

Source of Fund	2022 Approved Budget	Allotment (Jan - Sept)	Actual Expenditure (Jan-Sept)	Execution Rate
Capex	377,483,000	90,778,358	79,812,111	21.14%
DONOR	1,304,216,000	1,128,086,369	1,128,086,369	86.50%
Goods & Services	78,482,000	291,946,535	291,946,535	371.99%
Capex	1,225,734,000	836,139,834	836,139,834	68.22%
ABFA	32,424,000	18,474,690	8,706,941	26.85%
TOTAL	10,745,793,878	7,863,914,713	8,045,487,569	74.87%

Source: 2022 MoF Budget Statement and Economic Policy and MoH financial Statement

2.2.1 Challenges

During the fiscal year 2022, the Ministry faced a number of challenges. The following are some of the difficulties encountered during the fiscal year in question:

- Inadequate essential health commodities to support routine and COVID-19 activities
- Delay in processing financial clearance onto the payroll system
- Poor health information management system
- Delays in submission of Agencies Budget Performance Reports
- Delays in payment of NHIS claims
- Inadequate e-learning facilities at various health training schools
- Inadequate resources – human, logistical and financial to enable the agencies execute their mandate.
- Inadequate capacity of Regulatory Agencies to monitor health professionals, facilities, and products.
- Increased number of quack professionals and fake products.
- Impact of COVID-19
 - Limited funds to support routine and COVID-19 activities
 - Increased workload on health facilities, equipment, and health workers due to the COVID-19 pandemic
 - Disruptions in academic calendar of Health Training Institutions due to the COVID-19 pandemic

CHAPTER THREE

3.0 PRIORITY AREAS FOR 2023

With 2023 being the second year of the HSMTDP 2022-2025 implementation, the Ministry will prioritize, among other strategies, the following areas, taking into account past successes and challenges:

Essential services for the population

- Increase the availability of essential health service packages across the continuum of care at all levels
- Improve EPI coverage in urban centres
- Continue the implementation of the policy on HIV Test, Treat and Track (90 90 90), Prevention of Mother to Child Transmission (PMTCT) Option and B plus and reduction of Mother to Child Transmission (MTCT) of HIV Eliminate mother-to-child transmission of HIV
- Improve school health and nutrition services
- Establish the Ghana CDC
- Establish the Vaccine Manufacturing Institute
- Strengthen Primary Health Care (PHC) Systems at the lower level through the Network of Practice concept

Management of clinical and public health emergencies

- Strengthen institutions to deliver responsive pre-hospital and clinical emergency services
- Set up and strengthen institutions to deliver responsive public health emergency services

Improve quality of care and information management

- Institutionalize quality standards and practices in the delivery of health services
- Strengthen the management and quality assurance of national laboratories and infectious disease centers
- Set up and make functional health systems research and innovation framework

Enhance efficiency in human resource performance

- Ensure the production, equitable deployment and retention of health workforce
- Increase the pre-service and in-service training of healthcare workers in management of NCDs
- Increase the national capacity of delivery of mental health services
- Enhance human resource capacity for public health emergencies and medical emergency services

Health policy, financing and system strengthening

- Increase GoG revenue collection and allocation to the health sector
- Increase population coverage and sustainability of health insurance
- Strengthen the capacity of MoH and its agencies to mobilize resources
- Increase active coverage of the NHIS, particularly indigent categories

Institutionalize reforms in sector effectiveness

- Establish sustainable programmes for prevention, screening and early detection of NCDs, including cancers
- Strengthen and ensure compliance with referral processes and procedures between all levels of care
- Increase partnerships for better access to health services through the One-Health approach
- Strengthen the health regulatory bodies for improved efficiency
- Improving health infrastructure at Primary, Secondary and Tertiary facilities
- Continue the implementation of the Supply Chain Master Plan
- Improve and harmonize provider payment systems to increase the efficiency of spending

Capital Investment Outlook for 2023

In 2023, the Ministry will continue efforts to improve health infrastructure and access to health care. Following receipt of statutory approvals and Value for Money audits, the following pipeline projects will be launched in 2023: the construction of oncology centers in Sunyani, Cape Coast, Koforidua, Tamale, and Ho, as well as the construction and equipping of the Accra Regional Hospital (Ridge Phase 2).

The Ministry will carry out an equipment retooling project for Maternal and Child Health Services in selected District Hospitals with the help of the French Government. The project will help fund the outfitting of special units (Dental, Laundry, Laboratory, and Mortuary) under District Hospitals Clinical Laboratory Improvement Project (CLIP). Furthermore, with the help of the European Investment Bank, Ghana will work to improve the Accelerating Tuberculosis Case Detection in Ghana Project.

Other projects include the rehabilitation and expansion of Cape Coast Teaching Hospital, the redevelopment of Manhyia hospitals and two other health facilities in Agogo and Jema, and the development of Regional Medical Stores in the newly formed regions. The Capital Investment Plan, Annex 3 of this document, details the specifics of these projects.

2023 COVID-19 Outlook

In 2023, the Ministry and its Agencies will continue to implement the proven interventions that have been in place since the outbreak of the COVID-19 pandemic, including:

- Improving surveillance systems and education to aid in the detection and response to new pandemics;
- Risk Communication;
- Case Management and Containment;
- Testing and Laboratory Services;
- Establishing the Ghana CDC and the National Vaccine Institute and
- Collaborating with its development partners.

CHAPTER FOUR

4.0 2023 HEALTH SECTOR PROGRAMME BASED BUDGET

Over the years, the health share to the total government budget has remained relatively constant 7.66%, 6.72%, 6.61%, 7.56% and 6.71% percent in 2019, 2020, 2021, 2022 and 2023 respectively. This means that the total budget allocated to health over the years is far below the Abuja target of 15%. Annex 5a shows trends in health share of total Government expenditure (2019-2023).

4.1 2023 Budget Gap Analysis

The total budget projected need for 2023 is GHC28.2billion for all economic classification. Total projected Compensation is GHC9.8billion, Goods & Service GHC12.8billion and Capex GHC5.6 billion. However, total approved budget to the Ministry is GHC15.28billion leaving a gap of GHC12.93billion. Comparing the gaps, Goods& Service constitute 75% (GHC9.7billion) of the total gap. This means that in the year 2023, the Ministry needs to intensify revenue mobilization to support most of its activities. The projected need does not include co-financing obligations which will be discussed later in the document. Table 10 below shows details of need, provision and gap.

Table 10: 2023 Budget Gap Analysis

Item	Need (GHC)	Provision (GHC)	Gap (GHC)
Compensation	9,819,284,971	8,764,670,893	1,054,614,078
Goods & Service	12,795,628,852.59	3,095,081,950	9,700,546,903
Capex	5,605,801,604	3,425,162,413	2,180,639,191
Total	28,220,715,428	15,284,915,256	12,935,800,172

4.2 2023 Approved Budget

The table 11 below indicates the 2023 approved budget for the Ministry of Health. Comparing to 2022, there was a 42.24% budgetary allocation increase (nominally). The total approved health sector budget for 2023 is GHC15.28 billion. GoG remains the main source of funding contributing 54.11%, IGF 25.43%, Donor 19.60%, and ABFA 0.85%. Compensation of employees continues to be the largest consumer of the health budget accounting for 57.34%, Goods and services 20.25% and Capex 22.41%. Out of the total GoG budget of GHC6.35 billion, compensation of employee takes up 99.63% with Goods and Services and Capex 0.32% and 0.05% respectively.

Table 11: 2023 Budget by Source of Funding

Source of Funds	Compensation of Employees	Goods and Services	Capex	Total	% share
GoG	8,240,574,381	26,373,510	4,027,067	8,270,974,958	54.11
IGF	524,096,512	2,790,770,640	572,059,002	3,886,926,154	25.43
Donor	-	277,937,800	2,718,601,720	2,996,539,520	19.60
ABFA	-		130,474,624	130,474,624	0.85
TOTAL	8,764,670,893	3,095,081,950	3,425,162,413	15,284,915,256	100.00

4.3 Breakdown of 2023 Budget by Programs

The Ministry has four main budget programs namely;

- (i) Management and Administration to provide stewardship for the sector and it is mainly carried out by the MoH headquarters.
- (ii) Health Service Delivery for the provision of preventive, promotive, curative, palliative, emergency care, mental health and rehabilitative care at the primary, secondary and tertiary levels-this is mainly carried out by the GHS, CHAG, CPMR Teaching and psychiatric hospitals, Ambulance and Blood Services.
- (iii) Human Resource for Health Development and Management for the training of basic, post-basic and specialized health professionals and is carried out by the Health Training Institutions and Specialized Colleges.
- (iv) Health Sector Regulation to regulate health facilities, professionals, pharmaceuticals and medicinal health products, as well as food and non-medicinal health products. This is carried out by the FDA, HeFRA, MOFFA, Pharmacy Council, Medical & Dental Council, Nurses & Midwives Council, Psychology Council, Allied Health Professions Council and Traditional Medicine Practice Council.

The table below shows the allocation of the 2023 budget to the four Health Budget Programmes. As per the allocation, service delivery which is the core function of the Ministry constitutes 66% of the total budget allocation. Management and Administration constitutes 28% which includes GoG and Donor capital investment votes.

Table 12: Breakdown of 2023 Budget by Budget Programs

Budget Program	Source of Fund				Total	% Allocation
	GOG	IGF	DONOR	ABFA		
Management and Administration	1,428,763,472	26,387,468	2,718,601,720	114,474,624	4,288,227,283	28%
Health Service Delivery	6,615,145,969	3,166,981,189	277,937,800	16,000,000	10,076,064,958	66%
Human Resource for Development	170,568,191	478,592,515	-	-	649,160,705	4%
Health Sector Regulation	56,497,327	214,964,983	-	-	271,462,310	2%
Total	8,270,974,959	3,886,926,155	2,996,539,520	130,474,624	15,284,915,256	100%

4.4 Co-financing

Co-financing is the Government contribution towards GAVI and Global Fund support to immunization, malaria, TB and HIV/AIDS programs. The National Health Insurance support to the Ministry has been the main source of funding for co-financing. Over the years, there have been challenges with co-financing in terms of low funding and non-release of approved funds.

In 2023, a total of USD71m has been projected as GAVI and Global Fund co-financing requirement for the Ministry of Health of which 2022 arrears constitute 36.57% and 2023 requirement 63.43%. The NHIA has been the main source of funding for co-financing over the years. It is therefore expected that an allocation will be made for 2023 co-financing in the NHIF allocation formula. The challenge however, has been the inability of the allocation to cover the total co-financing requirement. The table below shows the details of the 2023 co-financing budget.

Table 13: GoG Co-Financing Obligations and Arrears

Activity	Need (USD)	Need (GHC)	NHIF (GHC)	Gap (GHC)
Arrears	26,238,266	367,335,724	-	367,335,724
Global Fund co-financing - Arrears 2022	21,557,541	301,805,574	-	301,805,574
Gavi Co-financing - Arrears 2022	4,680,725	65,530,150	-	65,530,150
Gavi Co-Financing - 2023	15,911,397	222,759,558	76,000,000	146,759,558
o/w Co-financing obligation for vaccines and devices	10,111,397	141,559,558	72,000,000	69,559,558

Activity	Need (USD)	Need (GHC)	NHIF (GHC)	Gap (GHC)
o/w Cost of Traditional vaccines and devices	5,800,000	81,200,000	4,000,000	77,200,000
Global Fund Co-Financing - 2023	28,600,395	400,405,530	37,980,000	362,425,530
HIV/AIDS	12,697,800	177,769,200	24,350,000	153,419,200
TB	2,822,624	39,516,736	1,700,000	37,816,736
Malaria	13,079,971	183,119,594	11,930,000	171,189,594
Total 2023 (Gavi + GF)	44,511,792	623,165,088	113,980,000	509,185,088
Replenishment commitment	500,000	7,000,000	-	7,000,000
Total Requirement (Total 2023 + Arrears + Replenishment)	71,250,058	997,500,812	113,980,000	883,520,812

NB: Exchange Rate = GHC10.9: USD1.

2023 Resource Mobilization

It is expected that in 2023, the Ministry in collaboration with the Ministry of Finance will continue to work with World Bank to finalize the loan facility of USD178.67m. This loan facility will be spread over a period of four (4) years primarily to support Primary Health Care Investment Program-for-Results (PforR) at the district levels.

Resources secured from both GAVI and Global Fund in the later part of 2022, will be used to support specific agreed activities within the programs' framework. The details of the earmarked activities can be found at Annex 6.

Table 14: 2023 Resource Mobilization

Intervention Area	Amount (in US\$ m)
Global Fund COVID-19 Resource fund	115.4
GAVI COVID-19 Delivery Support	18
World Bank (PforR)	45.25
Total	178.67

NB: World Bank (PforR) in the table above is anticipated for 2023. However, annex 6 has details of the 4-year loan.

CHAPTER FIVE

5.0 PERFORMANCE ASSESSMENT FRAMEWORK

5.1 Sector Monitoring and Evaluation

Monitoring and evaluation are still important components of assessing sector performance. The 2023 APOW will be evaluated using tools developed by the Ministry and its stakeholders. The Holistic Assessment tools will be used in the sector-wide assessment. As part of the sector's monitoring processes, bi-annual monitoring by the Ministry and donors will be implemented. Furthermore, routine monitoring by various Agencies will be an essential component of the 2023 APOW monitoring. In 2023, the DHIMS will serve as the primary source of data for monitoring and evaluating the sector. The HSMTDP milestones agreed upon for 2023 will be closely monitored as well.

The following table represents the Health Sector indicators and targets for the medium term:

Table 15: MONITORING & EVALUATION FRAMEWORK/MATRIX FOR THE 2022-2025 HSMDTP

Goal 1: Increased access to quality essential health care and population-based services for all by 2030										
Programme 1: Management and Administration										
Sub- Programme 1.1: General Management										
Indicators	Indicator Definition	Indicator Type ¹	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of Planned Preventive maintenance activities implemented	Number of scheduled PPM (3 times servicing per year) implemented divided by the number of scheduled PPM for the period multiplied by 100	Processes	N/A	50	60	70	80	1. Region	2	MoH Relevant Agencies

¹ Indicator type refers to whether indicator is an input/process/output/outcome/impact indicator.

Percentage of ambulance service stations that are well-functioning (Ambulance, required number staff)	Number of ambulance stations that are well functioning divided by the total ambulance stations multiplied by 100	Outcome	100	100	100	100	100	1. Region 2. District	2	NAS
---	--	---------	-----	-----	-----	-----	-----	--------------------------	---	-----

Programme 1: Management and Administration

Sub- Programme 1.2: Health Research, Statistics, and Information Management

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Proportion of primary health facilities reporting no stock-out of tracer medicines	Number of primary health facilities reporting no stock out over the reporting period divided by the number of primary health facilities multiplied by 100	Outcome	Not readily available	70	80	90	95	1. Facility type 2. District 3. Region	2	MOH Relevant Service Delivery Agencies
Percentage of health facilities using electronic medical records	Number of health facilities using electronic medical records divided by total number of health facilities multiplied by 100	Output	Not readily available	20	40	60	80	1. Facility type 2. District 3. Region	2	MOH Relevant Service Delivery Agencies

Percentage of health facilities reporting service data to DHIM2 on time	Number of facilities reporting data to DHIMS2 on time divided by the total number of facilities required to report, multiplied by 100	Output	85	90	95	95	95	1. Facility type 2. District 3. Region	2	All Service Delivery Agencies
Percentage of facilities reporting complete data to DHIMS2	Number of facilities reporting complete data to DHIMS2 divided by the total number of facilities required to report, multiplied by 100	Outcome	95	96	97	98	98	1. Facility type 2. Geographic region (district/region)	2	All Service Delivery Agencies
Percentage of facilities births registered with CRVS (Civil Registration & Vital Statistics)	Number of facilities births registered with CRVS divided by total number of facilities required to register	Outcome	Not readily available	70	80	85	95	1. Facility type 2. Geographic location (district/region)	2	All Service Delivery Agencies
Percentage of private health facilities reporting into the DHIMS2	Number of private health facilities reporting into DHIMS2 divided by total number of private health facilities, multiplied by 100	Outcome	14.5	20	40	60	80	1. Facility type 2. Geographic location (district/region)	2	MoH GHS HeFRA

Percentage of scheduled Data Validation Feedbacks sent to regions	Number of scheduled Data Validation Feedbacks sent to regions divided by total number of data validation, multiplied by 100	Output	N/A	70	80	90	100	1. Hospital type (district, region) 2. Geographic location (district/region)	1	GHS
Percentage of scheduled Quarterly Data Quality Audits conducted at Regional/District levels	Number of Quarterly Data Quality Audits conducted at Regional/District levels divided by number of scheduled Data Audits	Output	50	75	100	100	100		2	GHS

Programme 1: General Administration and Management

Sub- Programme 1.3: Health Policy Formulation, Planning Budgeting Monitoring and Evaluation

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of planned interventions to address dietary deficient conditions implemented	Number of planned interventions implemented divided by number of planned interventions multiplied by 100	Processes		40	60	70	80	1. Region 2. District	2	All Service Delivery Agencies

Percentage of School-based infirmaries established in all private and public basic schools	Number of Basic schools (Public and Private) with infirmaries divided by the total number of basic schools (Public and Private) multiplied by 100	Processes	Not readily available	40	50	60	80	1. Region 2. District	2	All Service Delivery Agencies
Percentage of facilities with quality improvement plans developed	Number of facilities with quality improvement plans developed divided by total number of facilities	Processes	Not readily available	20	40	60	80	1. Facility type 2. Geographic location (district/region)	2	MOH Relevant Agencies
Percentage of Hospitals with Functional Drug and Therapeutic Committees	Number of hospitals with Functional Drug and Therapeutic Committees established divided by total number of hospitals	Output	Not readily available	40	60	80	100	1. Hospital type (district, regional) 2. Geographic location (district/region)	1	All Service Delivery Agencies

Percentage of Facilities with Telemedicine integrated into routine service delivery	Facilities with Telemedicine integrated into routine service delivery divided by total number of health facilities, multiplied by 100	Outcome	N/A Check with GHS-PPME)					1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH All Service Delivery Agencies
Percentage of planned UHC interventions/activities implemented by the private sector	Number of planned interventions implemented divided by total number of planned interventions, multiplied by 100	Output	Not readily available	10	20	30	40	1. Types (infrastructure, logistic, training, advocacy, etc)	2	MOH Relevant Agencies
Annual Holistic Assessment of the Health Sector conducted	Availability of the report	Process	Holistic assessment conducted for 2020 and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMTD P and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMT DP and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMT DP and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMT DP and reported produced		1	MOH
Percentage of action items in the aide memoire addressed/completed by the end of the year	Number of actions implemented	Output	Not readily available	80	90	95	100		2	MOH

Common guideline to harmonize regulation of facilities, licensing, accreditation, and credentialing developed and passed	Availability of the common guideline	Output	No existing harmonized guideline for regulating healthcare facilities	Common guideline developed harmonizing all existing tools for accreditation and credentialing					1	MOH Relevant Institutions
Percentage of current Health expenditure devoted to PHC		Outcome	83 ²	85	87	90	92	1. Facility type 2. Location (district/region)	2	MOH
Percentage of planned health policies developed	Number of policies developed divided by total number of planned policies, multiplied by 100	Processes	No existing policies	40	60	80	100		2	MOH Relevant agencies
Percentage of planned health policies reviewed	Number of policies reviewed divided by total number of planned policies to be reviewed, multiplied by 100	Processes	Current health policies to be reviewed	40	60	80	100		2	MOH Relevant agencies
Government health expenditure as % of total government expenditure	Ratio of government health expenditure to total government expenditure multiplied by 100	Outcome	9	10	11	13	15		1	MOH

² Ghana | PHCPI (improvingphc.org)

Out-of-pocket as % of current health expenditure (CHE)	Put-of-pocket payments made for health services divided by total current health expenditure, multiplied by 100	Output	38 (WHO NHA database, 2018)	36	34	32	30		1	MOH
Percentage of the population with active NHIS coverage	No. of active NHIS members divided by estimated population, multiplied by 100	Output	53	57	62	67	70	1. Member category 2. Sex 3. Geographic location (district/region/national)	2	NHIA
Average time of claims settlement	No. of months taken to settle healthcare provider claims upon receipt	Output	3	3	2	2	1		2	NHIA
Percentage of claims expenditure (Medical cost ratio)	Ratio of medical claims paid to total expenditure for a given fiscal year	Output	73 (comprise 61% curative and 12% preventive services payments)	74	76	78	80		2	NHIA
Proportion of scheduled stakeholder engagements organised to review essential services	Number of meetings organised to review essential services in a year within the health sector	Process	Not readily available	60	100			1. Region 2. District	2	MOH Relevant Agencies

Percentage of regions with Emergency Command and Call Centres established	Number of regions with Emergency Command and Call Centres divided by total number of regions	Output	N/A	55	70	85	100	1. Region	1	GHS
Percentage of districts with at least one operational Network of service providers established	Number of districts with at least one Operational Network of Practice established divided by the total number of districts multiplied by 100	Output	Not available	20	40	60	80	1. District	2	GHS Relevant stakeholders
Percentage of districts with network of service providers established		Output	Not readily available	10	20	30	40	1. Region 2. District	2	GHS/relevant stakeholders
Proportion of Regions with costed Epidemic Preparedness Plan	Number of regions with Epidemic Preparedness Plan divided by total number of regions multiplied by 100	Output	Not readily available	50	60	70	80	1. Region	1	NAS GHS Relevant agencies

Programme 1: Management and Administration

Sub- Programme 1.4: Finance and Audit

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			

Programme 1: Management and Administration

Sub- Programme 1.5: Procurement, Supply and Logistics

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
------------	----------------------	----------------	---------------	---------	--	--	--	----------------	----------------------	----------------

				2022	2023	2024	2025			
Percentage of primary health care facilities restocked with essential tracer medicines	Number of primary health care facilities restocked with essential tracer medicines divided by number of primary health care facilities multiplied by 100	Process	Not readily available	20	40	60	100	1. Facility type 2. Geographic location (district/region)	2	MOH GHS
Percentage of CHPS zones with functional community emergencies transport system or ambulance	Number of functional CHPS zones with community emergency transport system divided by total number of demarcated CHPS zones	Output	79	80	85	90	100	1. Region 2. District	2	GHS
Percentage of hospitals with ICU facilities	Number of Hospitals with Intensive care facilities divided by the total number of hospitals multiplied by 100	Output	Not readily available	10	25	64	80	1. Region 2. District	2	All service delivery agencies
Ratio of Ambulance to population	Number of ambulances dedicated to serve the population (target is 1:50,000)	Input	1:111,331	1:95,000	1:85,000	1:75,000	1:50,000		1	NAS
Percentage of public hospitals with established functional A&E Unit		Output	42	50	55	60	65	1. Region District	2	All service delivery agencies

Percentage of facilities having GhILMIS installed and implemented	Number of facilities that have GhILMIS installed and implemented divided by the number of targeted facilities for onboarding multiplied by 100	Processes	1508 facilities onboard	60	70	80	90	1. Facility types 2. Regional medical stores 2. Geographic location (district/region)	2	MOH GHS
Percentage of facilities reached by Last Mile Distribution (LMD)	Number of facilities reached by LMD divided by total number of facilities.	Output	50	60	70	80	90	1. Facility type 3. Geographic location (district/region)	2	MOH GHS
Percentage of facilities with basic medical equipment	Number of facilities with basic medical equipment divided by total number of facilities, multiplied by 100	Output	Not readily available	65	70	75	80	1. Facility type 2. Geographic location (district/region)	2	All service delivery agencies
Percentage of planned essential medical equipment procured and distributed	Number of essential medical equipment procured and distributed divided by number of essential medical equipment planned to be procured and distributed, divided by 100	Processes	N/A (see procurement director)					1. Facility type 2. Geographic location (district/region)	2	MOH GHS
Programme 1: Management and Administration										
Sub- Programme 1.6: Human Resources Management										

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Number of staff per Ambulance service station		Input	10	10	12	15	25	1. Region 2. District	1	NAS
Doctor to population ratio	Number of nurses divided by total population	Output	1:6,355 2020 target 1:5,000	1:5000	1:4000	1:3000	1:2,000	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH GHS
Nurses to population	Total number of nurses divided by total population	Outcome	1:701 2020 target 1:700	1:600	1:500	1:400	1:300	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH GHS
Nurse to patient ratio	Total number of nurses divided by total number of OPD and IPD patients	Outcome						1. Hospital type (district, region) 1. Geographic location (district/region)		Relevant service delivery agencies
Doctor population equity index (Geographical)	Doctor population ratio for the best endowed region divided by the doctor population ratio for the worst endowed region	Outcome	0.1	0.5	0.6	0.7	0.8	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH GHS
Nurse Population equity index (Geographical)	Nurse population ratio for the best region divided by the Nurse population ratio for the worst region	Outcome	0.5	0.6	0.7	0.8	0.9	1. Hospital type (district, region) 3. Geographic location (district/region)	2	MOH GHS

Midwife to WIFA ratio	The number of pregnant women per one midwife	Outcome	1:560	545	530	515	500	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH GHS
Ratio of midwife to deliveries	The average number of deliveries conducted by one midwife	Outcome						1. Hospital type (district, region) 3. Geographic location (district/region)	2	MOH GHS
Proportion of facilities with number of midwives as per staffing norms	Number of facilities with required numbers of midwives as per staffing norms divided by the number of facilities offering reproductive health services	Output	Not readily available					1. Hospital type (district, region) 2. Geographic location (district/region)	2	Relevant service delivery Agencies
Midwife to WIFA population equity index (Geographical)	Best performing region Midwife to WIFA ratio divided by Worst performing region Midwife to WIFA ratio	Outcome	0.6	0.7	0.8	0.9	1	1. Hospital type (district, region) 3. Geographic location (district/region)	2	MOH GHS
Percentage of Districts with Rapid Response Teams	Number of districts with RRTs divided by total number of districts multiplied by 100	Output	N/A	75	80	95	100		2	GHS

Programme 2: Health Service Delivery

Sub- Programme 2.1: Primary and secondary health services

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets	Disaggregation	Monitoring Frequency	Responsibility
------------	----------------------	----------------	---------------	---------	----------------	----------------------	----------------

				2022	2023	2024	2025			
OPD per capita attendance	Number of outpatient department visits per person per year	Outcome	0.96	1.0	1.3	1.5	2	1. Region 2. Sex 3. Age	2	Relevant service delivery Agencies
Percentage of health centres offering essential basic package	Number of health facilities offering essential basic services divided by total number of operational health centres	Output	Not existing	20	40	60	80	1. Region 2. District 3. Level of health facilities (health centres/dist. hosp./reg. hosp.)	1	MOH Relevant Service Delivery Agencies
Percentage of women in WIFA covered with Cervical cancer screening	Number of WIFA screened for cervical cancer divided by total WIFA (15-49 years), multiplied by 100	Outcome	N/A	20	30	50	70	1. Region 2. District	1	Service Delivery Agencies
Percentage of facilities conducting deliveries that are equipped to provide basic EmONC services	Number of facilities conducting deliveries that are equipped with basic EmONC services divided by total number of facilities conducting deliveries, multiplied by 100	Output	Not readily	40	60	80	100	1. Region 3. District	1	Relevant Service Delivery Agencies

ANC 4+ (%)	Number of pregnant women who made at least 4 ANC visits during the pregnancy divided by the total ANC registrants multiplied by 100	Outcome	58.6	60	62	64	66	1. Region 2. District	2	Relevant Service Delivery Agencies
Institutional Neonatal Mortality Rate	Neonatal deaths per 1,000 institutional live births	Impact	7.43	7.10	6.80	6.50	6.30	1. Region 2. District	1	Relevant Service Delivery Agencies
Mother to child HIV transmission rate at 18 months	Number of children born to HIV + mothers who tested negative at 18 months divided by total number of children born to HIV + mothers who were tested multiplied by 100	Outcome	74.44	80	85	90	>95	1. Region 2. District	1	GHS/NACP
Stillbirth Rate	Number of babies born with no signs of life at or after 28 weeks of gestation per 1,000 live births	Impact	12.69	12.40	12.20	12.00	11.80	1. Region 2. District 3. Type of still birth (fresh/macera ted)	2	Relevant Service Delivery Agencies

Skilled birth attendance coverage (%)	Number of births attended by skilled health professionals divided by total number expected deliveries	Outcome	58.67	60	62	64	66 (Check with SDG target)	1. Region 2. District	2	Relevant Service Delivery Agencies
No. of children fully immunized (Using Penta 3 as proxy (%))		Outcome	94.2	95	96.5	97	98	1. Region 2. District	1	Relevant Service Delivery Agencies
Percentage of Health facilities offering IMNCI services		Output	Not readily available	40	60	80	100	1. Region 2. District	1	Relevant Service Delivery Agencies
Proportion of disease outbreaks identified, and response actions started within 24-48 hours	Number of disease outbreaks for which response was within the 24-48 hours divided by total number of disease outbreaks multiplied by 100	Outcome	Not readily available	80	85	90	95	1. Region 2. District	1	Relevant Service Delivery Agencies
Percentage of facility deaths that are medically certified	Number of facility deaths certified divided by total number of facility deaths, multiplied by 100	Outcome	59.6	80	90	95	100	1. Facility type 2. Geographic region (district/region)	2	Relevant Service Delivery Agencies
Proportion of maternal deaths audited	Number of maternal deaths audited divided by total number of maternal deaths multiplied by 100.	Outcome	96.4 (DHIMS)	97	98	99	100	1. Facility type 2. Geographic location (district/region)	2	Relevant Service Delivery Agencies

Programme 2: Health Service Delivery										
Sub- Programme 2.2: Tertiary Health Services										
Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Proportion of deaths attributed to Non-Communicable Diseases	Number of deaths due to non-communicable disease in a 100,000 population	Impact	43.5	40	38	35	30	1. Region 2. Sex 3. Age	2	Relevant Service Delivery Agencies
Mortality rates for (adult, elderly) 60+ years	Number of deaths among adults and elderly per 1,000 population	Impact	Not readily available	25	20	15	10	1. Region 2. Age 4. Sex	2	Relevant Service Delivery Agencies
Percentage of voluntary blood donations	Number of blood donations collected from voluntary unpaid blood donors divided by total number of blood donations collected,, multiplied by 100	Output	26	33	40	43	45	1. National 2. Regional 3. Zonal blood centres	2	National Blood Service
Blood collection index (BCI) per 1000 population	Total number of blood donations divided by the population, multiplied by 1000	Output	5.7	6.2	6.8	6.9	7.0	1. National 2, Regional	2	National Blood Service

Percentage of whole blood donations separated into components	Number of whole blood donations used to prepare blood components divided by all whole blood donations, multiplied by 100	Output	18	24	26	28	30	1. National 2. Regional 3. Zonal blood centres	2	National Blood Service
---	--	--------	----	----	----	----	----	--	---	------------------------

Programme 2: Health Service Delivery
Sub- Programme 2.3: Research

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Malaria Incidence per 1000 population	The number of confirmed cases of malaria in a year per 1,000 population at risk	Impact	192	219	228	219	210	1. Region 2. District 3. Sex 1. Age	1	GHS/NMCP
HIV Prevalence (15-49 years)	Percentage of people tested in the age group who were found to be infected with HIV	Impact	1.69	1.62	1.60	1.58	1.55	1. Region 2. District 3. Sex 2. Age	1	GHS/NACP

TB Incidence per 100,000 Population	Number of new TB cases that occur during a specified time period x 100,000 population at risk	Impact	143	126	119	112	110	1. Region 3. District	1	GHS/NTP
TB treatment success rate (%)	Number of new, registered TB cases that were cured or completed a full course of treatment divided by total number of new registered cases, multiplied by 100	Outcome	84	89	90	90	90	1. Region 2. District 3. Sex 2. Age	1	GHS/NTP
TB case detection rate	Number of all forms of TB cases (i.e., bacteriologically confirmed plus clinically diagnosed) new and relapse, reported in the past year divided by total population, multiplied by 100,000	Outcome	47.3	73.5	74.5	76	85.5	1. Region 2. District 3. Sex 3. Age	1	GHS/NTP
Prevalence of mental health disorders among women and young adults		Outcome	15.2 (GSS)	14.70	14.20	13	12.20	1. Region 2. District 3. Sex 4. Age	2	MHA/Psychiatric Hospitals

Prevalence of wasting among children under five (%)	Number of children with weight for height < -2 SD of the WHO Child Growth Standards median divided by the total number of children assessed multiplied 100	Outcome	7 (MICS 2011)	6.8	6.5	6.2	6	1. Degree (moderate/severe) 2. Region 5. District	1	Relevant Service Delivery Agencies
Prevalence of stunting among children under five years.	Number of children under one year who were given Penta 3 vaccine divided by the estimated target number of children in the cohort multiplied by 100	Outcome	18 (MICS 2011)	16	14	12	10	1. Degree (moderate/severe) 2. Region 3. District	1	Relevant Service Delivery Agencies
Total fertility Rate	Average number of children that would be born to a woman over her lifetime if: She was to live from birth until the end of her reproductive life	Impact	4 (GMHS 2017)	4	4	3	3	1. Region 2. District 3. Age	Survey years	GSS
Under-five mortality rate (per 1000lb)	Deaths occurring among children under 5 years per 1,000 live births	Impact	60 (GDHS)	55	50	45	40	1. Region 4. District	2	Relevant Service Delivery Agencies

Infant Mortality Rate (per 1000lb)	Deaths among children under 1 per 1,000 live births	Impact	41(GDHS)	38	35	32	28	1. Region 2. District	2	Relevant Service Delivery Agencies
Prevalence of diabetes	Total number of people screened who had the selected diabetes divided by the total number of people screened multiplied by 100	Outcome	Not readily available					1. Region 2. District 3. Diabetes type 4. Sex 5. Age	1	Relevant Service Delivery Agencies
Teenage pregnancy rate	Number of conceptions per hundred young women under 18 years of age, which may lead to a live birth or termination of pregnancy	Outcome	14 (2017 GMHS)	12	10	8	6	6. Geographic location (Region/District)	Survey Year	Relevant Service Delivery Agencies
Prevalence of anaemia among children of school going age (%)	Number of children of school going age with Hemoglobin concentration below the standard defined divided by the total number of children of school going age sampled and tested	Outcome	66 (DHS)	60	55	50	45	1. Region 2. District 7. Sex	1	Relevant Service Delivery Agencies

Obesity in adult population ages 24-60years. (%)	Percentage of adults (24-60 years) who are obese (defined as having BMI >30kg/m ²)	Outcome	16 (DHS)	15	13	11	9	1. Region 2. District 3. Sex	1	Relevant Service delivery agencies
Prevalence of hypertension	Number of persons less than 60 years diagnosed with high blood pressure (recording at least 140mmHg systolic pressure and 90mmHg diastolic pressure) divided by total number of persons less than 60yrs	Impact	13 (DHS)	12	12	11	10	1. Region 2. District 4. Sex 5. Age	1	Relevant Service Delivery Agencies
Prevalence of high blood glucose in the population	Proportion of population diagnosed with high blood sugar levels	Impact	N/A					1. Region 2. District 6. Sex	1	Relevant Service Delivery Agencies
Ratio of injuries and deaths from road traffic accidents		Impact	N/A	500:1	400:1	350:1	200:1	1. Region 7. District	1	Service delivery agencies and relevant stakeholders

Institutional Under 5 Malaria Case Fatality Rate	Number of deaths due to malaria among children under 5 divided by total number of under 5 malaria cases multiplied by 100	Impact	0.12	0.06	0.04	0.02	0.01	1. Region 2. District	1	Relevant Service Delivery Agencies
Prevalence of Yaws	Confirmed and suspected cases of yaws per 100,000 population	Impact	25	50	75	100	125	1. Region 2. District	1	GHS-NTDCP
Percentage of facilities with quality assessment of services conducted	Number of facilities with quality assessment of services conducted divided by total number of targeted facilities	Output	N/A	60	80	90	100	1. Facility type 3. Geographic region (district/region)	2	MOH Relevant Service Delivery Agencies
Prevalence of Anaemia among pregnant women	Percentage of pregnant women with a Haemoglobin in less than 110 g/L adjusted for altitude and smoking.	Outcome	Baseline (50.8% DHS 2014) WHO target 5% or lower (align with GIFT target)				5%	1. Facility type 2. Geographic location (district/region)	2	Relevant Service Delivery Agencies

IPT3 coverage	Number of pregnant women receiving IPT3 divided by total number of pregnant women attending the facility multiplied by 100	Outcome	44.4	64.1	69.4	74.7	80	1. Facility type 2. Geographic location (district/region)	2	GHS, NMCP
Percentage of planned Operational Surveys (Outpatient & Inpatient Satisfaction Surveys) conducted	Number of planned operational surveys conducted divided by total number of planned operational surveys multiplied by 100	Output	Not readily available	50	60	70	80	1. Facility type 2. Geographic location (district/region)	1	Relevant Service Delivery Agency
Percentage of Hospitals conducting at least three rational use of medicines survey in a year	Number of hospitals conducting at least three rational use of medicines survey in a year divided by total number of hospitals, multiplied by 100	Output	Not readily available	50	60	70	80	1. Hospital type (district, region) 3. Geographic location (district/region)	1	Relevant Service Delivery Agency

Average percentage of clients satisfied with OPD/IPD services	Number of clients satisfied with OPD/IPD services divided by number of sampled clients attending OPD/IPD, multiplied by 100	Outcome	85	90	95	97	100	1. Hospital type (district, region) 4. Geographic location (district/region)	2	Relevant Service Delivery Agency
Modern contraceptive prevalence rate	Proportion of women of reproductive age (15-49 years) who are using modern contraceptive methods (or whose partner is using) a contraceptive method at a given point in time	Outcome	20 (MHS 2017)	25	30	35	40	1. Region 2. District 1. Age	2	Relevant Service Delivery Agency
Total estimated protection by contraceptive methods supplied (Couple Year Protection (CYP))		Outcome	1,479,064					2. Sex 5. Geographic location (district/region)	2	Relevant Service Delivery Agency
Overall life expectancy at birth		Impact	63(2017/2018)	64.5	65	65.5	66	1. Sex 3.	1	GSS

Programme 2: Health Service Delivery

Sub- Programme 2.4: Pre-hospital services

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			

Average response time to emergencies	Amount to time taken to receive, activate and respond to emergency medical services request	Output	22:43	19:43	16:43	13:43	10:43	1. Region 1. District	2	NAS
Average case handling time (hrs)	Amount of time taken to hold or handle the patient for transportation to the receiving healthcare facility	Outcome	2:18:17	2:08:17	1:58:17	1:48:17	1:38:17	2. Region	2	NAS
Average vehicle engaged time (hrs)	Amount of time taken for the ambulance to leave the station to offer emergency medical services and return	Outcome	5:37:24	5:22:24	5:07:24	4:52:24	4:37:24	3. Region	2	NAS
Average facility turn around time (hrs.)	Facility Turnaround Time (FTT) - Time taken for a crew to handover patient after arriving at the receiving facility. (Handover - Arrival Hosp)	Outcome	00:37:48	00:35:48	00:30:48	00:25:48	00:20:48	4. Region	2	NAS

Programme 3: Human Resource Development

Sub- Programme 3.1: Pre-service training

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			

Average pass rate of Midwifery schools	Number of midwives passing the licensure examination divided by the total number of midwives who took the examination multiplied by 100	Outcome	Data not readily available					1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH-HR N&MC
--	---	---------	----------------------------	--	--	--	--	---	---	-------------

Programme 3: Human Resource Development
Sub- Programme 3.2: Post- Basic training

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of regions with trained PHEMCs/RRTs	Number of regions with trained PHEMCs/RRTs divided by total number of regions divided by 100	Processes	not readily available	40	60	80	100	1. Region	2	GHS
Percentage of scheduled BLS and ALS organised in all the regions	Number of trainings on BLS and ALS organised in all the regions divided by number of scheduled trainings on BLS and ALS	Processes	Not readily available	1	2	3	4	1. Region 2. District	2	Relevant Service Delivery Agency

Percentage of public hospitals with staff trained in providing Basic Life Support (BLS) & ALS	Number of hospitals with staff trained in providing BLS and ALS divided by the numbers of target hospitals divided by 100	Output	Not readily available	50	60	70	80	1. Region 2. District	2	Relevant Service Delivery Agency
Percentage of Persons trained in BLS that are Non-Health Professionals	Number of non-health professionals trained divided by the total number of staff multiplied by 100	Outcome	N/A	50	65	70	75	1. Region 2. District	2	Relevant Service Delivery Agency
Percentage of scheduled trainings organised for all Hospital emergency teams	Number of public hospitals where emergency teams have been trained divided by total number of hospitals multiplied by 100	Input	N/A	60	70	80	100	1. Region 1. District	2	Relevant Service Delivery Agency
Percentage of hospitals with trained Emergency Management Teams (EMT)	Number of Public Hospitals with trained EMT divided by the total number of public hospitals	Output	N/A	50	75	85	100	1. Region 2. District	2	Relevant Service Delivery Agency

Percentage of Hospitals with trained Quality Management Teams (including at least 1 Community Member) that meet quarterly	Number of Hospitals with trained Quality Management Teams (including at least 1 Community Member) that meet quarterly divided by total number of hospitals, multiplied by 100	Output	N/A	60	70	80	90	1. Hospital type (district, region) 2. Geographic location (district/region)	2	Relevant Service Delivery Agency
---	---	--------	-----	----	----	----	----	---	---	----------------------------------

Programme 3: Human Resource Development

Sub- Programme 3.3: Specialized Training

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of specialist nurses, midwives, doctors trained annually	Number of associate or membership who graduated and inducted divided by the number who enrolled annually multiplied by 100	Output		75	80	85	90	1. Specialist 2. Gender	2	Specialised Training Agencies
Proportion of members and fellows in good standing	Number of fellows/members in good standing divided by total number of fellows and members	Output	13	50	70	80	90	1. Specialist 2. Gender	2	Specialised Training Agencies

Proportion of nurses/midwives/doctors trained in CPDs	Number of nurses, midwives, doctors trained divided by total number of nurses/midwives, doctors	Output	81	85	90	95	97	1. Specialist 2. Gender	2	Specialised Training Agencies
Proportion of accredited clinical training centres	Number of accredited training centres divided by total number of facilities	Output	54	60	65	70	80	1. Region 2. Training sites	2	Specialised Training Agencies
Practical exams pass rate	Number of residents who passed the exams divided by total number of residents who sat for the exams, multiply by 100%	Outcome	83	85	87	90	95	1. Specialist 2. Gender	2	Specialised Training Agencies

Programme 4: Human Sector Regulation

Sub- Programme 4.1: Regulation of Health Facilities

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Percentage of facilities requesting accreditation that are inspected by HeFRA		Output	Not readily available	50	60	80	95	1. Facility type 2. Geographic location (district/region)	2	MoH HEFRA

Percentage of facilities with entry point licenses	Number of facilities with entry point licenses divided by total number of facilities inspected, multiplied by 100	Outcome	Not readily available	50	60	70	80	3. Facility type 4. Geographic location (district/region)	2	HeFRA NHIA Pharmacy Council
--	---	---------	-----------------------	----	----	----	----	--	---	-----------------------------------

Programme 4: Health Sector Regulation

Sub- Programme 4.2: Regulation of Health Professionals

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Average licensure pass rate for health professionals (Human Resource capacity development)	Number of students trainees passed professional exams divided by the total number of students that sat for licensure exams, multiplied by 100	Outcome	82.9	85	87	90	95	1. Schools 2. Training type (pre-service, post-basic, specialized training) 3. Professionals 4. Geographic location (district/region)	2	MoH Relevant Agencies

Programme 4: Human Sector Regulation

Sub- Programme 4.3: Regulation of Pharmaceuticals and Medical Health Products

Indicators	Indicator Definition	Indicator Type	Baseline 2021	Targets				Disaggregation	Monitoring Frequency	Responsibility
				2022	2023	2024	2025			
Proportion of encounters with antibiotics prescribed	Number of patient encounters with antibiotics divided by total number of sampled prescriptions, multiplied by 100	Outcome	21	18	15	13	10	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MoH Relevant service delivery agencies

Average number of medicines per prescription	Average number of medicines prescribed divided by total patient encounters, multiplied by 100	Outcome	3	3	3	3	3	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MoH Relevant service delivery agencies
--	---	---------	---	---	---	---	---	---	---	--

6.2 Milestones

Health Policy Objectives	2023 Milestones
HO1: Universal access to better and efficiently managed quality healthcare services	<ul style="list-style-type: none"> <input type="checkbox"/> Attain 100% health insurance coverage for primary level services <input type="checkbox"/> Improve financial risk protection, access to quality essential health-care services, and access to safe, effective, quality and affordable essential medicines and vaccines for all <input type="checkbox"/> Increase health financing and the recruitment, development, training and retention of the health workforce.
HO2: Reduced avoidable maternal, adolescent and child deaths and disabilities	<ul style="list-style-type: none"> <input type="checkbox"/> Reduce maternal mortality ratio by two-thirds over the 2017 figures <input type="checkbox"/> Reduce by three-quarters neonatal, child and adolescent disabilities
HO3: Increase access to responsive clinical and public health emergency services	<ul style="list-style-type: none"> <input type="checkbox"/> Functional clinical emergency centres in all health facilities <input type="checkbox"/> Reduce occurrence, morbidity and mortality associated with disease outbreaks

1000
1000

Annex 1: 2023 Budget Allocation by Agency

2023 Summary of Expenditure by Cost Center, Economic Item and Funding

Version 1		GoG		IGF		ABFA		Donors		Grand Total			
		Compensation of employees	Goods and Services	Capex	Total	Compensation of employees	Goods and Services	Capex	Total	ABFA	Goods and Services	Capex	Total
Ministry of Health	8,240,574,381	26,373,510	4,027,067	8,270,974,958	524,056,511	2,790,770,640	572,059,002	3,886,926,154	130,474,624	277,937,800	2,718,601,720	2,996,539,520	15,284,915,255
Health Headquarters	1,258,249,928	11,848,510	3,814,733	1,273,913,171	1,237,548	29,275,742	697,032	31,210,323	130,474,624	2,718,601,720	2,718,601,720	4,154,199,838	
National Blood Service	6,267,253	200,000		6,467,253	1,237,548	6,315,742	697,032	8,250,323					14,717,576
Ghana Health Service (GHS)	4,248,734,270	5,000,000		4,253,734,270	281,139,352.00	1,305,695,724.00	174,092,895.00	1,740,928,972.00		277,937,800			6,272,601,042
Psychiatry Hospitals (Tertiary Health Services)	72,310,838	7,000,000		79,310,838	2,054,974	12,573,960	2,344,230	16,983,163					96,294,001
Accra Psychiatric Hospital	28,990,981	2,345,700		31,336,681	600,355	3,001,776	400,237	4,002,368					35,339,049
Panlang Hospital	27,517,448	2,646,700		30,164,148	965,002	6,755,033	1,930,004	9,650,019					39,814,167
Ankafu Hospital	15,802,409	2,007,600		17,810,009	499,616	2,817,171	13,989	3,330,776					21,140,785
Christian Health Association of Ghana	1,422,778,936			1,422,778,936	119,719,941	517,190,880	159,867,805	796,778,626					2,219,557,562
Regulatory Agencies	54,846,035	2,025,000	212,334	57,083,369	33,027,811	137,269,582	43,545,942	213,843,335					270,926,704
Food and Drugs Authority	31,957,581			31,957,581	21,511,575	64,334,726	21,511,575	107,557,876					139,515,457
Medical and Dental Council	1,617,844			1,617,844	2,010,925	14,076,475	4,021,850	20,109,250					21,727,094
Nurses and Midwives Council	6,634,880			6,634,880	5,094,259	35,659,814	10,188,518	50,942,591					57,577,471
Pharmacy Council	4,238,708			4,238,708	2,011,260	10,694,325	3,854,915	16,760,501					20,999,209

Ghana College of Physicians and Surgeons	1,733,639		1,733,639	2,842,574	12,317,650	3,790,046	18,950,229													20,683,868	
College of Pharmacist	514,404		514,404	112,266	1,384,609	374,219	1,871,093														2,385,497
Mortuaries and Funeral Facilities Agency	525,537		525,537	51,650	845,670	224,330	1,121,650														1,647,187
Mental Health Authority	2,493,597	100,000	2,593,597																		2,593,597
College of Nurses and Midwives	2,380,888		2,380,888	962,655	6,738,585	1,925,310	9,626,550														12,007,438

Annex 2 Action Plan

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
Management Administration	& 1.1	Strengthen Management and Administration of the Sector	12 Directors' meetings held	X	X	X	X	MOH General Administration Directorate and Mental Health Authority
			4 Inter-Agencies' meetings organized	X	X	X	X	
			No. of special day celebrated	X	X	X	X	
		29 performance contracts signed	X	X	X	X		
		4 staff durbars organized	X	X	X	X		
		22 health bills and LIs developed	X	X	X	X		
Strengthen Legal framework of the Sector		Legal framework of the Sector	Protocols for mental health care developed		X	X		
			Mental health guidelines incorporated into the criminal justice system	X	X	X	X	
			Mental health tribunal established	X	X	X	X	
			No. of Partnership meetings held	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Strengthen Partnership	No. of International/Local committee meetings hosted	X	X	X	X	
			No. International/Local committee meetings Attended	X	X	X	X	
		Carry out Preventive maintenance activities	Quarterly Maintenance of MoH HQ building	X	X	X	X	
			Quarterly servicing of Vehicle	X	X	X	X	
			Quarterly Maintenance of equipment	X	X	X	X	
		Provide Public relations services	No. of Press briefing held	X	X	X	X	
	1.2	Strengthen Health Information Management System	Quarterly facility ICT maintenance visits conducted	X	X	X	X	
			Mental health data included in the national health information system		X	X		
			Quarterly updates of MoH website carried out	X	X	X	X	
			NCDs data included in the national health information system		X	X	X	
			NHIS information system linked to the District Health Information Management System (DHIMS2)	X	X	X	X	
			Develop Research Policy	Research Policy developed		X	X	X
		Expand E-Health and LMIS coverage	E-health policy developed	X	X	X		
			Quarterly monitoring visits to Health Electronic Medical Records System project sites	X	X	X	X	
								MOH Health Research & Statistics & Information Management Directorate

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			No. of new Health Electronic Medical Records System sites established	X	X	X	X	
	1.3		Health Financing Policy developed	X	X	X		
			Policy on Integration of Herbal Medicine into the main health care system developed		X	X	X	
			Policy on Intellectual property rights on Traditional Medicine developed	X	X	X		
			Health Sector Infrastructure Strategy developed	X	X	X		
			National Policy on suicide developed	X	X			MOH PPME, Infrastructure, Technical Coordination, TAMD
			Medical oxygen policy and strategy developed	X	X	X		Directorates and Mental Health Authority
		Develop/Review of Policies	Referral Policy revised	X	X	X		
			Capital investment plan revised	X	X	X		
			Annual Programme of Work document developed	X				
			Policy Alignment Framework for Key Determinants of Health developed	X	X	X	X	
			Traditional and Alternative Medicine Policy revised	X	X	X	X	
			Health Security Policy developed	X	X	X	X	
			National IPC Policy/Strategy developed	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			National Aerial Logistics Policy developed	X	X	X	X	
			Health Sector Gender Policy revised	X	X	X	X	
			Annual Health Financing Implementation Plan developed	X	X	X		
			Number of Policies disseminated	X	X	X	X	
			2023 Sector Programme Based Budget developed			X	X	
			Annual/Quarterly Budget Performance Reports produced	X	X	X	X	
		Strengthen Budget and development and management	Quarterly Budget Committee meetings held	X	X	X	X	
			Semi-annual budget monitoring conducted		X		X	
			Quarterly Parliamentary Select Committee Meetings held	X	X	X	X	
		Strengthen Sector Public Financial Management System	No. of PFM meetings held	X	X	X	X	
			PFM Plan developed		X	X		
			IGF Guideline developed	X	X	X		
			2021 National Health Account document developed			X	X	
		Monitor and evaluate the sectors Programmes and Projects	Holistic Assessment report produced	X	X			
			Joint Monitoring reports produced		X		X	
		Establish Ghana Vaccine Institute	National Vaccine Institute Policy developed.	X	X	X		
			Secretariat established	X	X	X		

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			National Vaccine Institute Bill passed		X	X	X	
			Ghana CDC secretariat established					
		Establish Ghana Centre for Disease Control	CDC operational plan developed	X	X	X	X	
			CDC LI drafted					
			Mental health fund established		X	X		
		Mobilize Resources for the Sector	Resource mobilization plan developed	X				
			GAVI transition plan reviewed		X	X		
	1.4		Annual/Quarterly financial statements produced	X	X	X	X	
			Quarterly financial monitoring visits to agencies conducted	X	X	X	X	
		Strengthen PFM activities/Strengthen Internal Operations	Train financial/non-financial managers on GIFMIS		X	X		MOH Finance & Audit Directorates
			Annual/Quarterly Audit reports produced	X	X	X	X	
			No. of Audit conferences arranged	X	X	X	X	
			Train financial/non-financial managers on PFM guidelines		X	X		
	1.5		Annual health sector procurement plan developed	X	X			

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
				X	X	X	X	
			Percentage of essential health commodities procured	X	X	X	X	MOH Procurement Directorate
			Procured COVID-19 vaccines	X	X	X	X	
			Procured COVID-19 commodities	X	X	X	X	
			No. of facilities implementing the LMIS	X	X	X	X	
			Quarterly visits to LMIS sites conducted	X	X	X	X	
		Develop/Implement Sector-Wide Procurement Plan	Percentage of procurement plan implemented	X	X	X	X	
			Quarterly National quantification activities conducted	X	X	X	X	
			Quarterly quality assurance monitoring visits undertaken	X	X	X	X	
			Quarterly Debt Recovering Monitoring visits undertaken	X	X	X	X	
			No. of Procurement Contract Agreements signed	X	X	X	X	
1.6		Strengthen HR policy development	Policy on Attraction and Retention of Health Workers to deprived areas developed	X	X	X	X	MOH Human Resource Directorate
			Free Medical Care for all Health Workers explored		X	X		
			Scheme of Service for health professionals developed	X	X			
			Annual Financial Clearance obtained		X	X	X	
		Recruit, post and promote health staff	No. of health professionals allocated to Agencies		X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency	
Health Service Delivery	2.1	Coordinate Staff management	No. of staff placed on IPPD	X	X	X	X	GHS, CHAG, Ahmadiyya Health Service,	
			Quarterly staff welfare meetings held	X	X	X	X		
			Quarterly Staff Audit reports developed	X	X	X	X		
		Strengthen training of health professionals	No. of Health Professionals sponsored for training		X	X	X		X
			No. of Partnership training programmes held		X	X	X		X
			No. of in-service training organized		X	X	X		X
		Improve Primary and Secondary Health Service Indicators	Total outpatient visits		X	X	X		X
			Total in-patient admissions		X	X	X		X
			ANC attendance		X	X	X		X
			Neonatal deaths per 1,000 institutional live births		X	X	X		X
			skilled birth rate		X	X	X		X
			Number of deaths due to malaria among children under 5		X	X	X		X
			Proportion of children fully immunized by age 1 (using Penta3 as proxy)		X	X	X		X
			Number of maternal deaths audited		X	X	X		X
			Malaria prevalence rate		X	X	X		X
			Percentage of children sleeping under ITNs		X	X	X		X
		HIV infection rate		X	X	X	X		
HIV infection rate among pregnant women		X	X	X	X				

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
				X	X	X	X	
			Stillbirth rate	X	X	X	X	
			Number of new TB cases detected	X	X	X	X	
			No. of TB defaulters	X	X	X	X	
			TB treatment success rate	X	X	X	X	
			*Percentage of stunted growth in children	X	X	X	X	
			Proportion of Under 5 years death per 1,000 live births	X	X	X	X	
			Proportion of under 1 death per 1,000 live births	X	X	X	X	
			Contraceptive acceptor rate	X	X	X	X	
			No. of health centers participating in the networks of practice	X	X	X	X	
			Percentage of essential medicine/commodities available	X	X	X	X	
			Specialist Outreach Services undertaken	X	X	X	X	
			Collection, entry, analysis, and utilization of data on NCDs in Ghana improved	X	X	X	X	
			Registry for NCD disease e.g., cancer, hypertension etc. established	X	X	X	X	
		Implement NCD policy and strategy	COVID-19 National action plan implemented	X	X	X	X	
		Implement the National Immunization Programme	No. of children immunized (penta 3 proxy)	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Expand Traditional and Alternative medicine	No. of traditional medicine wings created in public facilities	X	X	X	X	
		Implement the Last Mile Distribution Plan	No. of facilities implementing the LMIS	X	X	X	X	
		Implement the Essential Health Services Package	Essential Health package implemented in all facilities	X	X	X	X	
			Neglected tropical diseases integrated into the essential health services package	X	X	X	X	
		Strengthen Disease Surveillance and Control	No. of maternal death recorded and audited	X	X	X	X	
			No. of tablets procured (support SORMAS)	X	X	X	X	
			No. of port health points established at frontiers	X	X	X	X	
			No. of disease surveillance and control officers employed	X	X	X	X	
		Promote Health Education	No. of disease surveillance and control officers trained	X	X	X	X	
			No. of public education programmes conducted	X	X	X	X	
		Strengthen Disposal of medical waste	Percentage of medical waste disposed off properly	X	X	X	X	
			No. of incinerators constructed	X	X	X	X	
	2.2	Improve Tertiary and Specialised	Total outpatient visits	X	X	X	X	Teaching Hospitals and
			Total in-patient admissions	X	X	X	X	Hospitals and
			ANC attendance	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Health Service Indicators	Neonatal deaths per 1,000 institutional live births	X	X	X	X	Psychiatric Hospitals
			skilled birth rate	X	X	X	X	
			Under 5 malaria death	X	X	X	X	
			Number of maternal deaths audited	X	X	X	X	
			Malaria prevalence rate	X	X	X	X	
			HIV infection rate	X	X	X	X	
			HIV infection rate among pregnant women	X	X	X	X	
			Stillbirth rate	X	X	X	X	
			Number of new TB cases detected	X	X	X	X	
			No. of TB defaulters	X	X	X	X	
			TB treatment success rate	X	X	X	X	
			Proportion of Under 5 years death per 1,000 live births	X	X	X	X	
			Proportion of under 1 death per 1,000 live births	X	X	X	X	
			Contraceptive acceptor rate	X	X	X	X	
			Percentage of essential medicine/commodities available	X	X	X	X	
			No. of Specialist Outreach Services undertaken	X	X	X	X	
			COVID-19 National action plan implemented	X	X	X	X	
		Implement NCD policy and strategy	Collection, entry, analysis, and utilization of data on NCDs in Ghana improved	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			Registry for NCD disease eg cancer, hypertension etc established	X	X	X	X	
				X	X	X	X	
		Expand Traditional and Alternative medicine	No. of traditional medicine wings created in tertiary and specialized facilities	X	X	X	X	
		Strengthen Disease Surveillance and Control	No. of monitoring visits conducted	X	X	X	X	
		Promote Health Education	No. of public education programmes conducted	X	X	X	X	
		Strengthen Disposal of medical waste	Percentage of medical waste disposed off properly	X	X	X	X	
			No. of incinerators constructed	X	X	X	X	
			Total outpatient visits	X	X	X	X	
			Total in-patient admissions	X	X	X	X	
			Mental health screening integrated into school health programmes	X	X	X	X	
		Provide mental health services	No. of training workshops for general health workers to detect and treat mental health conditions	X	X	X	X	
			No. of follow-up home visits carried out	X	X	X	X	
	2.3	Develop Herbal and Alternative medicine	No. of Herbal medicines formulated	X	X	X	X	Centre For Plant Medicine Research (CPMR)
			No. of Herbalist products analyzed	X	X	X	X	
			Acres of Herbal farms cultivated	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			Number of research publications produced	X	X	X	X	
			Number of Scientific Conferences, workshops and short courses	X	X	X	X	
		Conduct operational Health Research	Number of research proposals reviewed	X	X	X	X	
			Collection, entry, analysis, and utilization of data on NCDs in Ghana improved	X	X	X	X	
			Disseminate research findings	X	X	X	X	
			No. of Functional Ambulances	X	X	X	X	
			No. of ambulances procured	X	X	X	X	
			No. of Cases Handled	X	X	X	X	
			Average Response Time estimated	X	X	X	X	
			No. of trained EMT Drivers and Emergency Medical Dispatchers	X	X	X	X	
			Percentage of voluntary unpaid blood donations	X	X	X	X	
		Promote Pre-Healthcare Services	Blood collection index (BCI) per 1000 population	X	X	X	X	NBS, NAS, SJAB
			Percentage of samples tested for all transfusion transmissible infections (TTIs)	X	X	X	X	
			Percentage of whole blood donations separated into components (FFP)	X	X	X	X	
			No. of BLSS activities carried out	X	X	X	X	
			No. of educational talks on blood donations organized	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
Human Resource for Health Development and Management	3.1	Admit and certify basic-level health professionals	No. of new students admitted	X	X	X	X	HTIs, HR
			No. of nurses trained	X	X	X		
		No. of midwives trained	X	X	X			
		Pre-service training curricula reviewed to include NCD programmes	X	X	X			
		Training institutions upgraded to meet accreditation criteria	X	X	X			
		Pre-service training programme re-organized to focus on middle-level specialization	X	X	X			
	3.2	Admit and certify middle-level health professionals	No. of new specialized programmes in Health Training Institutions introduced	X	X	X	X	
			No. of new students admitted					
		No. of nurses trained	X	X	X			
		No. of midwives trained	X	X	X			
		No. of Allied health professionals trained	X	X	X			
		Training institutions upgraded to meet accreditation criteria	X	X	X			
Post-basic training programme re-organized to focus on middle-level specialization	X	X	X					

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
			No. of new specialized programmes in Health Training Institutions introduced	X	X	X	X	
			No. of Resident Doctors admitted	X	X	X	X	
			No. of Resident Pharmacists admitted	X	X	X	X	
			No. of Resident Nurses admitted	X	X	X	X	
		Admit and certify Specialized Health Professional	No. of Specialist doctors trained/graduated	X	X	X	X	
			No. of Specialist pharmacists trained/graduated	X	X	X	X	
			No. of Specialist Nurses trained/graduated	X	X	X	X	
		Conduct CPDs	Number of CPDs conducted (Doctors)	X	X	X	X	
			Number of CPDs conducted (Pharmacists)	X	X	X	X	
			Number of CPDs conducted (Nurses/Midwives)	X	X	X	X	GCPS, GCNM, GCPHarm
		Improve Specialist training	No. of new curricula introduced to strengthen the training of specialists	X	X	X	X	
			No. of new faculties established	X	X	X	X	
			No. of College Libraries upgraded	X	X	X	X	
			No. of new specialized programmes in Health Training Institutions introduced	X	X	X	X	
	3.3		Number of clinical sites engaged, monitored and supervised	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
Health Sector Regulation	4.1	Accredit and License health facilities	Number of new programmes developed	X	X	X	X	HeFRA
			No. of new health facilities licensed	X	X	X	X	
			No. of facilities licenses renewed	X	X	X	X	
			Number of facilities with valid licenses	X	X	X	X	
			No. of inspection visits conducted	X	X	X	X	
			Number of facilities monitored	X	X	X	X	
			Number facilities registered through Online Management Information System	X	X	X	X	
	4.2	Regulate health professionals (Doctors, Pharmacists and Nurses and Allied Health personnels)	No. of Doctors in good standing	X	X	X	X	MDC, GPC, PC, N&MC
			No. of Nurses in good standing	X	X	X	X	
			No. of Pharmacist in good standing	X	X	X	X	
			No. of Allied health personnel in good standing	X	X	X	X	
			No. of CPDs conducted	X	X	X	X	
			No. of licensure exams conducted	X	X	X	X	
			No. of internship training programmes accredited	X	X	X	X	
	Undertake Career development Programmes	No. of Specialized Training Institutions accredited	X	X	X	X	MDC, GPC, PC, N&MC	
		Conduct research and evaluate standards of education, training and practice of health professionals	X	X	X	X		
		Implement policy on Practitioners Stamp, Name Tags and Professional Apparel	X	X	X	X		

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
	4.3	Licensing of medical products facilities	640 manufacturing facilities licensed	X	X	X	X	FDA
			24 storage facilities licensed	X	X	X	X	
		Safety monitoring of medical products	5,560 adverse effect reports received.	X	X	X	X	
		Registration of medical products	10,484 products registered	X	X	X	X	
		Product quality monitoring	77% of products that passed testing.	X	X	X	X	
			Quality control testing of medical products	87% of products tested.	X	X	X	X
			Market surveillance of medical products	16,648 outlets visited.	X	X	X	X
	4.4		Licensing of food facilities.	1,900 manufacturing facilities licensed	X	X	X	X
				444 storage facilities licensed	X	X	X	X
			Registration of food products	9,276 products registered	X	X	X	X
		Product quality monitoring	2% of products that passed testing.	X	X	X	X	
		Quality control testing of food products	95% products tested.	X	X	X	X	

Program	Sub-program	Operation	Expected Output	Q1	Q2	Q3	Q4	Lead Agency
		Market surveillance of food product.	15,532 outlets visited.	X	X	X	X	
		Permitting of food service establishment and street food vendors.	52 street food vendor permits issued. 684 food hygiene permits issued.	X	X	X	X	
		Monitoring of iodation of salt	200 permits issued	X	X	X	X	
		Enforcement of international code for marketing of breast milk substitutes LI1667.	2% of non-conforming products identified ³ .	X	X	X	X	
		Implement food safety management systems in food manufacturing industries	70% of non-conforming facilities.	X	X	X	X	

Annex 3 Capital Investment Plan

FINAL DRAFT - 2023 CAPEX BUDGET						
ITEM	TITLE OF PROJECT	GOG (GHS 1,560,192.00)	COVID SUPPORT (GHS 2,466,875.00)	ABFA (GHS 130,474,624.00)	LOAN & MIXED CREDIT ON-GOING (GHS 2,718,601,720.00)	
A. ARREARS ON CERTIFICATES UNPAID AS AT AUGUST 2022						
1.0	Provision for arrears from 2021-2022 in the sector	1,347,858.00	-	5,321,036.31		
2.0	Provision for payment of retention					
3.0	Provisions for payment for Consultancy on projects					
	Sub Total	1,347,858.00	-	5,321,036.31		

B. PROJECTS REQUIRING MATCHING FUNDS								
4.0	Rehabilitation of Bolgatanga Regional Hospital -SAUDI Projects Phase III							90,950,000.00
5.0	Project Preparation and Feasibility Studies							
6.0	Compulsory Acquisition of the Land Fronting Pantang Hospital							
	Matching Fund for Ridge Hospital Phase II (Acquisition of Land)			2,000,000.00		3,000,000.00		
	Sub Total			2,000,000.00		3,000,000.00		90,950,000.00
C. TURNKEY PROJECTS WITH SECURED FUNDING								
7.0	Completion of Kumawu, Fomena and Takoradi European Hospital Staff Housing under the Seven (7) District Hospitals Project							207,580,000.00
8.0	Completion and Equipping of 2No. Regional Hospitals in Wa and Kumasi and 6No. District Hospitals with Staff Housing at Adenta/Madina, Twifo-Praso, Konongo-Odumasi, Nsawkaw, Tapa and Salaga							500,000,000.00

9.0	Completion and Equipping of Maternity and Childrens Block at Komfo Anokye Teaching Hospital in the Ashanti Region					400,000,000.00
10.0	Construction of Five (5) and Upgrading of One (1) Public Health Facilities in the Western Region by Orio at Akontombra, Bogoso, Wassa Dunkwa, Mpohoh, Elubo and Nsuarn					40,315,053.40
11.0	Construction of Eastern Regional Hospital in Koforidua by JV Tyllium-Ellipse Project UK Ltd.					470,000,000.00
12.0	Rehabilitation and Expansion of Shama Hospital by Poly Changda International					288,080,000.00
13.0	Rehabilitation and Expansion of La General Hospital by Poly Changda International					120,000,000.00
14.0	Construction of Urology & Nephrology Centre of Excellence at Korle-Bu Teaching Hospital - Accra					100,000,000.00
15.0	Construction of District Hospital at Obuasi, Anyinam Trauma Hospital and Accident and Emergency Centre at Enyiresi Hospital and Renovation of					104,604,539.20

16.0	Obuasi Health Centre	Rehabilitation of Effia Nkwanta Hospital and Construction of Western Regional Hospital at Agona Nkwanta by Amandi				150,000,000.00
17.0		Construction of 11 No. 40-Bed and 1 No. 30-Bed Hospitals in Ashanti, Bono, Greater Accra and Eastern Regions at Suame, Manso Nkwanta, Twedie, Drobonso, Sabronum, Kpone Katamanso, Kwabeng, Achiase, Jumapo, Adukrom, Nkwatia and Mim				62,080,499.40
18.0		Construction of Tema General Hospital & Central Medical Stores and Rehabilitation of Nkoranza and Dormaa Hospitals in Ghana				22,000,000.00
19.0		Construction and Equipping of 400 Bed Maternity Block at Korle-Bu Teaching Hospital - Accra				30,791,628.00
20.0		Construct and equip five District Hospitals at Oslem, Assin Kuyea and Kutre, 40-Bed Hospital at Dormaa Akwamu and Upgrade the Wamfie Polyclinic to				40,000,000.00

	60-Bed District Hospital						
21.0	Supply of Ambulances and Related Training and Maintenance Services					30,000,000.00	
22.0	Supply and Installation of Medical Equipment for Eight (8) Selected District Hospital					40,000,000.00	
23.0	Construction of 3 District Hospital at Ayensuano, Offinso and Effiduase and Completion of Maternity Blocks at Tafo Hospital & Kumasi South Hospital and Residential Facility at Abrepo for Kumasi South Hospital.					22,200,000.00	
	Sub Total					2,627,651,720.00	
D. ON GOING PROJECTS WITH HIGH SOCIAL PROTECTION IMPACT							
24.0	Completion of 15 ongoing CHPS Compounds in 2018					1,653,587.69	
25.0	Completion of 26 CHPS Compounds in 2019					14,000,000.00	
26.0	Completion of 8 CHPS Compounds in 2022					12,000,000.00	

27.0	Construction of Maternity Block for Nsawam Government Hospital at Nsawam				3,000,000.00
28.0	Construction of Health Centre at Memepeasem in the Greater Accra Region				1,500,000.00
29.0	Rehabilitation of Cape Coast Teaching Hospital Accident & Emergency Unit				2,000,000.00
30.0	Completion of Hostel block and External Works at Cape Coast NTC				1,800,000.00
31.0	Completion of Nswora Health Centre in the Sefwi Akontombra District				2,000,000.00
32.0	Rehabilitation of Diabetes Management, Research and Training Center at Korle-Bu Teaching Hospital				1,000,000.00
33.0	Construction of Fencewall at Pantang Hospital				1,400,000.00
34.0	Completion and equipping of Pankrono Health Centre				2,000,000.00
35.0	Renovation of Korle-bu Ministry of Health SSNIT Flat Staff Accommodation - Court 7B and 9B				3,000,000.00

36.0	Supply of Vehicles				4,000,000.00
37.0	Supply of Office Furniture and Computers for MOH and GHS HQ				
38.0	Supply and Installation of Equipment for CHPS Compounds initiated in 2018/2019 and other specialised hospital facilities				
39.0	Supply and Installation of Equipment for Treatment Centre in selected facilities				
40.0	Maintenance and retooling of selected health facilities including Saltpond, Elimina, Bechem, Accra Mental, Pantang, Chiraa etc.				7,000,000.00
41.0	Construction of Health Centre in selected locations Funbesi, Walewale				5,000,000.00
42.0	Upgrade of Daboya Health Centre to a Polyclinic				4,000,000.00
43.0	Treatment and Holding Centre at Takoradi				6,000,000.00
44.0	Treatment and Holding Centre at Nalerigu		100,000.00		5,000,000.00

45.0	Treatment and Holding Centre at Sunyani			366,875.00	6,000,000.00
46.0	E-health Project				30,000,000.00
	Supply and Installation of Generators for selected facilities				2,000,000.00
	Sub Total	-		466,875.00	114,353,587.69
E. GHS ON- GOING PROJECTS WITH HIGH SUNK COST AND HIGH SOCIAL PROTECTION IMPACT					
47.0	Completion and Equipping of Nationwide CHPS Compound initiated in 2012 by GHS				6,000,000.00
48.0	Construction and Completion of Greater Accra Regional Administration Block for Ghana Health Services				
49.0	Construction of Offices for Ghana Psychologic Council	212,334.00			300,000.00
50.0	Renovation of Korlebu GHS SSNIT Flat Staff Accommodation				1,500,000.00
	Sub Total	212,334.00			7,800,000.00
F. HEALTH INSURANCE FUNDED PROJECTS					

51.0	Construction of Wards, CSSD & Laundry, Theatre, Mortuary and Block of flats for Akatsi District Hospital					
52.0	Construction of Selected Health Training Institutions: Sampa, Asafo NTC, Teshie NTC etc.					
53.0	Construction of Maternity Block for Nsawam Government Hospital at Nsawam					
54.0	E-Health Project					
	Sub Total					
	Grand Total	1,560,192.00	2,466,875.00	130,474,624.00	2,718,601,720.00	

Annex 4 Procurement Plan

No.	Contract Package	Procurement Category	Source of Funds	Comments	Estimated Amount (GHS)
1	Expanded Programme on Immunization (EPI) Vaccines	Goods	GoG	GHS	90,000,000.00
2	Procurement of Male Condoms (No Logo) (Co-financing)	Goods	GoG	GHS	7,900,000.00
3	Procurement of Contraceptives	Goods	GOG	GHS	1,200,000.00
4	Procurement of Rabies Vaccines	Goods	GoG	GHS	2,000,000.00
5	Procurement of Anti-Snake (Polyvalent)	Goods	GoG	GHS	27,957,720.00
6	Procurement of Tetanus Immunoglobulin	Goods	GoG	GHS	2,000,000.00
7	Procurement of CSM Vaccines & Medicines	Goods	GoG	GHS	3,000,000.00
8	Procurement of TB Commodities	Goods	GoG	GHS	2,100,000.00
9	Procurement of Blood Collection Bags & Reagents for NBTS	Goods	GoG	GHS	1,050,000.00
10	Procurement of Antimalaria Medicines (Artemether Lumefantrine)	Goods	GoG	GHS	11,930,000.00
11	Procurement of LongLasting Insecticide Treated Nets (LLINS)	Goods	GoG	GHS	20,100,000.00
12	Procurement of Psychotherapeutic Medicines	Goods	GoG	GHS	22,000,000.00
13	Procurement of Essential Medicines for the Health Sector through Framework Contracting for 2023	Goods	GoG	GHS	492,500,000.00
14	Printed Materials, Stationery, Office Supplies and other Consumables	Goods	GoG	GHS	2,500,000.00
15	Stationeries	Goods	GoG	GHS	1,000,000.00
16	Printing	Goods	GoG	GHS	1,000,000.00
17	Office Equipment	Goods	GoG	GHS	1,000,000.00
18	Other Consumables	Goods	GOG	GHS	800,000.00

No.	Contract Package	Procurement Category	Source of Funds	Comments	Estimated Amount (GHS)
19	Procurement of Office Equipment and Accessories	Goods	GoG	GHS	1,700,000.00
20	Procurement of Office Furniture	Goods	GoG	GHS	400,000.00
21	Supply of Office and Washroom Consumables for MoH	Goods	GoG	GHS	1,000,000.00
22	Procurement of HIV Commodities	Goods	Global Fund	GHS	340,900,000.00
23	Procurement of Contraceptives (Norigynon Pilules)	Goods	WAHO	GHS	1,608,432.00
24	Procurement of Contraceptives (Implanon NXT)	Goods	WAHO	GHS	2,073,666.00
25	Procurement of Contraceptives (Jadelle)	Goods	WAHO	GHS	7,000,000.00
26	Procurement of Contraceptives (No Logo Male Condom)	Goods	WAHO	GHS	5,474,056
27	Procurement of Medical Equipment and accessories	Goods	GoG	GHS	30,000,000.00
28	Procurement of Infection Preventive Control Supplies for the National AIDS/STI Control Programme	Goods	GoG	GHS	6,977,677.20
29	Procurement of Test Kits and Non-Drug Medical Consumables	Goods	GoG	GHS	136,553,600.00
30	Procurement of Male Condoms	Goods	GoG	GHS	79,000,000.00
31	Procurement of Sickle Cell Screening Supplies	Goods	GoG	GHS	500,000.00
32	Malaria Control Programme	Goods	GoG	GHS	95,000,000.00
33	National AIDS/STI Control Programme	Goods	GoG	GHS	97,678,900.45
	Total				1,495,904,051.65

Annex 5: BUDGET

Annex 5a Trends in Health Share of Total Government Expenditure, 2019 – 2023

	2019	2020	2021	2022	2023
MOH	6,037,506,718	6,587,092,478	8,533,590,233	10,996,595,000	15,284,915,256
TOTAL MDA	38,154,370,171	44,741,858,203	48,058,278,721	85,853,820,000	91,359,502,159
TOTAL GOVERNMENT BUDGET (TGB)	78,771,833,602	98,036,692,349	129,032,804,203	145,472,323,000	227,805,332,781
MOH share of total MDAs	15.82%	14.72%	17.76%	12.81%	16.73%
MOH share of TGB	7.66%	6.72%	6.61%	7.56%	6.71%
Abuja Target	15.00%	15.00%	15.00%	15.00%	15.00%

Annex 5b Year on Year budget change

Source of Funds	2022 (GHC)	2023 (GHC)	Percentage change
GoG	6,461,025,716	8,270,974,958	28.01%
IGF	2,948,128,000	3,886,926,154	31.84%
Donor	1,304,216,000	2,996,539,520	129.76%
ABFA	32,424,000	130,474,624	302.40%
TOTAL	10,745,793,716	15,284,915,256	42.24%

Annex 5c: Budget Annual % Change by Economic classification

Source Of Funds	2022 (GHC)	2023 (GHC)	Percentage change
GoG	6,461,025,716	8,270,974,958	28.01%
<i>Compensation</i>	6,165,200,000	8,240,574,381	33.66%
<i>Goods & Service</i>	186,810,116	26,373,510	-85.88%
<i>Capex</i>	109,015,600	4,027,067	-96.31%
ABFA	32,424,000	130,474,624	302.40%
IGF	2,948,128,000	3,886,926,154	31.84%
<i>Compensation</i>	407,821,000	524,096,512	28.51%
<i>Goods & Service</i>	2,162,824,000	2,790,770,640	29.03%
<i>Capex</i>	377,483,000	572,059,002	51.55%
Donor	1,304,216,000	2,996,539,520	129.76%
<i>Goods & Service</i>	78,482,000	277,937,800	254.14%
<i>Capex</i>	1,225,734,000	2,718,601,720	121.79%
Total	10,745,793,716	15,284,915,256	42.24%

Annex 5d: Breakdown of 2023 Budgetary Needs

Item	GoG	IGF	Donor	Need
Compensation	9,293,651,998	525,632,973		9,819,284,971
Goods & Service	9,128,714,068	2,793,536,641	873,378,144	12,795,628,853
Capex	1,109,569,015	567,756,540	3,928,476,049	5,605,801,604
Total	19,531,935,081	3,886,926,154	4,801,854,193	28,220,715,428

Annex 6: POSSIBLE/OFF-BUDGET FINANCING
Annex 6a: Global Fund COVID-19 Resource Fund (US\$115m)

Intervention Area	Amount (in US\$)
Mitigation for TB programs	21,696,660.28
Case management, clinical operations and therapeutics	18,896,941.13
Mitigation for HIV programs	12,029,530.39
Surveillance systems	11,840,755.42
Mitigation for Malaria programs	10,602,616.85
Health products and waste management systems	9,719,991.22

Intervention Area	Amount (in US\$)
Laboratory systems	9,105,244.47
Infection prevention and control and protection of the health workforce	4,617,702.79
Risk communication	4,483,215.70
COVID-19 CSS: Social mobilization	4,144,948.04
Surveillance: Epidemiological investigation and contact tracing	3,821,443.56
Country-level coordination and planning	2,163,491.79
COVID-19 CSS: Community-based organizations institutional capacity building	1,401,418.70
COVID-19 CSS: Community-led monitoring	626,241.93
COVID-19 CSS: Community-led advocacy and research	226,220.11
Total	115,376,422.38

Annex 6b: Gavi Covid-19 Delivery Support (US\$18m)

CORE CDS OBJECTIVE	BUDGET AMOUNT (US\$)	HIGH LEVEL SUMMARY OF KEY ACTIVITIES
High Risk Population	1,044,830	The outline activities focus on identifying the high-risk population, engaging them to provide them with information to enable them make an informed decision about their health and eventually provide them with COVID-19 vaccines to protect them against the disease
Adult Population	11,643,447	Activities in this objective include conducting high-impact. COVID-19 delivery strategies including mass vaccination campaigns to reach people targeted for the vaccine. Focus group discussions, application of the Reaching Every District (RED) approach, development of good quality micro plans will be conducted to achieve this objective

CORE CDS OBJECTIVE	BUDGET AMOUNT (US\$)	HIGH LEVEL SUMMARY OF KEY ACTIVITIES
COVID-19 and Routine Immunization Intergration	5,311,723	This involves the development of a strategic plan for the integration of COVID-19 and Life-Course Approach into routine immunization. Various recording and reporting tools in the DHIS2 will be revised to incorporate COVID-19 vaccination. There will be sustained demand generation activities to keep the public informed
Total	18,000,000	

Annex 6c: World Bank Performance for Reward Details

INTERVENTION AREA	AMOUNT
Primary Health Care Networks of Practice and Model Health Centers developed	14,080,000
Capacities, Accountability and Quality of Networks of Practice improved	4,700,000
Health Policies, Standards and Plans developed and Financing for Primary Health care improved	7,487,500
National Health Insurance Scheme Coverage expanded and Financing of Primary Health Care Services prioritized	6,925,000
Public Financial Management for Primary Health Care Services improved	1,555,000
Improved Utilization of Selected Primary Health Care Services	2,752,500
Sub-Total	37,500,000

INTERVENTION AREA		AMOUNT
GFF Round 1 grant (GFF 1)		3,750,000
GFF Essential Health Services grant (GFF 2)		4,000,000
Sub-Total		7,750,000
Grand Total		45,250,000

Annex 6d: Resource Mobilization from Bilateral Partners

PARTNER	AREA OF SUPPORT	2022	2023
KOFIHR	Maternal and Child Health improvement, Infrastructure and Medical equipment support, National Health Insurance, Capacity Building through the Lee Jon Wook Fellowships,	\$1,521,208	\$1,500,000

PARTNER	AREA OF SUPPORT	2022		2023
KOICA	<p>CHPS+ Phase 2 (Support primary healthcare delivery and Network of Practice in Upper East and North East Region under new CHPS+ Phase II Project)</p> <p>Global Health Security Agenda (Improving health security through strengthening of workforce development (IFETP training), strengthening of Public Health Laboratory Capacity, emergency response and surveillance), COVID 19 response</p> <p>Support to CHIM/E-tracker</p>	\$3.5 million	<p>CHPS+ Phase 2</p> <p>Global Health Security Agenda</p> <p>PPP Project - Infectious Disease Response Capability Improvement Project through the Establishment of the Accra Medical Diagnosis Center in Ghana</p>	<p>\$3.12m</p> <p>TBD</p> <p>\$0.5million</p>

PARTNER	AREA OF SUPPORT	2022	2023
JICA	<p>Quality of Care focusing on 5S-KAIZEN-TQM, Service Delivery (Scale up CHPS implementation focusing on Life Course Approach, Construction of Health Facilities including redevelopment of Tamale Central Hospital)</p> <p>Preparedness (Laboratory Quality Management in NMIMR, Cold Chain Equipment support)</p> <p>Capacity Development</p>	\$20.8Million	<p>Service delivery:(construction of Tamale Central Hospital, Implementation of Quality of Care for MNH project, Implementation of CHPS for life project</p> <p>Preparedness (Bio-medical Research and Epidemic Response) Improving safety and quality laboratory management systems at NMIMR, Rehabilitation of animal laboratory at NMIMR,</p> <p>Training (Capacity building)</p>
FCDO	Mental Health	380,000GBP	
USAID	<p>Health Systems Strengthening; family planning, RMNCH; malaria (PMI), HIV/AIDS (PEPFAR); water, sanitation and hygiene; social protection, COVID-19</p>	\$113,847,492	<p>Health Systems Strengthening; family planning, RMNCH; nutrition; malaria, HIV/AIDS; water, sanitation and hygiene; social protection, COVID-19</p>

Annex 7: 2022 Projects at various levels of completion

Planned Output (Activities)	Location	Output Achieved (%)
Construction of 2 Regional & 6 District Hosp. by Euroget	Konongo-Odumasi and Sewua	100%
	Salaga	68%
	Kumawu	70%
Construction of District Hospitals & Integrated IT System	Fomena	80%
	Takoradi European Flat	90%
	Akontombra	100%
Construction of 5 and upgrading of 1 public health facilities in the Western Region	Nsuem	100%
	Elubo	100%
	Wassa Dunkwa	100%
	Bogoso	100%
	Mpohor	100%
	Aburi Kom	100%
	Tetteh Quarshie	100%
	Kibi	100%
Modernization and equipping of 4 Selected facilities	Atibie	100%
	Bolga	88%
	Kumasi	55%
Completion and equipping of KATH Maternity and Children's Block Construction of Eastern Regional Hospital	Koforidua	48%
	Otumi	75%
	Akim Nkwantanang	56%
	Gyakiti	34%
Construction of 26 CHPS Compounds	Kwanyako	85%
	Jamasi	44%
	Wiaboman	38%
	Asunafo	66%
	Gbawe	62%