



**GHANA HEALTH SECTOR
2024 PROGRAMME OF WORK**

MINISTRY OF HEALTH

ACRONYMS

ABBREVIATION	MEANING
A&EU	Accident and Emergency Unit
ABFA	Annual Budget Funding Amount
AHPC	Allied Health Professionals Council
AIDS	Acquired Immune Deficiency Syndrome
ANC	Antenatal Care
APOW	Annual Programme of Work
AUDA	African Union Development Agency
BCI	Blood Collection Index
BLS	Basic Life Support
CDC	Centers for Disease Control
CHAG	Christian Health Association of Ghana
CHE	Current Health Expenditure
CHPS	Community-Based Health Planning and Services
COVID-19	Coronavirus - 2019
CPDs	Continuing Professional Development
CPMR	Centre for Plant Medicine Research
CRVS	Civil Registration & Vital Statistics
DHIMS	District Health Information Management System
ECOWAS	Economic Community of West Africa States
EHSP	Essential Health Services Package
EmONC	Emergency Obstetric and Newborn Care
EMT	Emergency Management Teams
EPP	Electronic Pharmacy Platform
FDA	Food and Drugs Authority
GAVI	Global Alliance for Vaccines and Immunisation
GCNM	Ghana College of Nurses and Midwives
GCPHarm	Ghana College of Pharmacists
GCPS	Ghana College of Physicians and Surgeons
GHC	Ghana Cedis
GhILMIS	Ghana Integrated Logistics Management Information System
GHS	Ghana Health Service
GoG	Government of Ghana
HeFRA	Health Facilities Regulatory Agency
HFS	Health Financing Strategy
HIV	Human Immune Virus
HSMTDP	Health Sector Medium Term Development Plan
HTIs	Health Training Institutions
ICU	Intensive Care Unit
IGF	Internal Generated Funds
IMF	International Monetary Fund
IPC	Infection Prevention and Control
IPPD	Integrated Personnel and Payroll Database
ISO	International Organisation for Standardisation
KATH	Komfo Anokye Teaching Hospital

ABBREVIATION	MEANING
KBTH	Korle Bu Teaching Hospital
KidsOR	Kids Operating Room
LMD	Last Mile Distribution
LMIS	Logistics Management Information System
MDC	Medical and Dental Council
MoF	Ministry of Finance
MoFFA	Mortuary and Funeral Facilities Agency
MoH	Ministry of Health
MRI	Magnetic Resonance Imaging
MTCT	Mother to Child Transmission
NAS	National Ambulance Service
NBS	National Blood Service
NCDs	Non-Communicable Diseases
NEPAD	New Partnership for Africa's Development
NHIA	National Health Insurance Authority
NHIF	National Health Insurance Fund
NHIS	National Health Insurance Scheme
NMC	Nurses and Midwives Council
NoP	Network of Practice
NVI	National Vaccine Institute
PBB	Program Base Budget
PC	Pharmacy Council
PC-PEG	Post COVID-19 Program for Economic Growth
PHC	Primary Health Care
PMTCT	Prevention of Mother to Child Transmission
PPM	Planned Preventive Maintenance
RRTs	Rapid Response Teams
SCMP	Supply Chain Master Plan
SDGs	Sustainable Development Goals
SSA	Sub-Saharan Africa
TB	Tuberculosis
TMPC	Traditional and Alternative Medicine Practice Council
UHC	Universal Health Coverage
UK	United Kingdom
WIFA	Women in Fertility Age

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FOREWORD



The 2024 Annual Program of Work (APoW) will focus on the implementation of key activities in the Health Sector Medium Term Development Plan (HSMTDP 2022-2025) which is geared towards the attainment of Universal Health Coverage (UHC) goal of “Increased access to quality essential health care and population-based services for all” by 2030. Six years from today, the sector will be reporting on the UHC roadmap targets. It is therefore, important for all of us to put in extra collective commitments in order to achieve

our goal.

The Ministry in 2024 will pursue the implementation of the Network of Practice (NoP) which is aimed at reorganising service delivery at the primary level to improve access and quality of care. Preventive services will receive the needed attention through the implementation of the new Essential Health Services Package (EHSP) and possible introduction of some preventive care services on the National Health Insurance Scheme (NHIS) benefit package.

The Ministry in 2024, will vigorously pursue the agenda of local vaccine manufacturing with the support of the newly created National Vaccine Institute (NVI). Through collaboration with the private sector arrangement and supported by the NVI, the Ministry will intensify efforts towards the development of anti-snake serum and other vaccines production as its first step towards local vaccine production in Ghana and Sub-Saharan Africa. Currently, there are two local companies (i.e., Atlantis Life Sciences and DEK) working towards this objective of vaccine production. Atlantis Life Sciences Company has now commenced the production of fill to finish for anti-snake serum and tetanus diphtheria in Ghana.

The Ministry’s efforts to improve access and quality of traditional medicine to the population will culminate in a private sector collaboration to operationalise the newly established Bio-equivalent center which will lead to the production and export of herbal medicines, clinically tested for efficacy in Ghana.

Management of health emergency continues to pose a challenge to the Ministry. To help improve the country’s emergency preparedness systems, the Ministry in 2024, will establish the Centre for Health Security to coordinate health emergency preparedness and response in the country. This will contribute to the strengthening of the health system’s ability to manage future public health outbreaks and sustain the gains made after COVID-19 pandemic.

Migration of health professions over the years has become a concern in Ghana. To help respond to this, the Ministry of Health in 2024 will develop a Health Migration Strategy to help harness the maximum benefits of labor migration in health.

The Ministry will continue to work to sustain the gains made so far and implement proven and innovative interventions to improve health outcomes. I therefore, call on all stakeholders to continue to support the Ministry to implement the 2024 Program of Work and beyond.

I wish to thank our healthcare providers both public and private and urge them to continue to support the health sector.

A handwritten signature in blue ink, appearing to read 'Kwaku Agyeman-Manu'. The signature is fluid and stylized, with a long horizontal stroke extending to the right.

KWAKU AGYEMAN-MANU (MP)
Minister for Health

CHAPTER ONE

1.0 INTRODUCTION

The program of work spells out the annual action plan of implementation of the Health Sector Medium Term Development Plan (2022-2025 HSMTDP) towards the achievement of the sustainable development goals (SDGs) pertaining to health.

The health sector is still struggling from the effect of the COVID-19 in the area of service delivery and budget to implement programs and activities. Amid these challenges, the Ministry was able to achieve some planned programs and activities. According to the 2022 Holistic Assessment Report, the sector's overall performance was rated as fairly good.

In 2024, the Ministry will solidify the progress achieved so far and continue the implementation of key programs and activities outlined in the HSMTDP (2022-2025). The priority areas in 2024 will continue to focus on the provision of essential services to the population, effective management of clinical and public health emergencies, improve quality of care and information management, enhance efficiency in human resource performance, ensure health policy, financing and system strengthening and institutionalize reforms in sector effectiveness.

In addition, the Ministry will operationalise the local manufacturing of vaccines to improve vaccine availability in country, establish Bio-equivalent center (Public-Private Partnership) to help the production and export of herbal medicines which will be clinically tested for efficacy in Ghana, establish the Center for Health Security to coordinate health emergency preparedness and response, operationalize the Network of Practice (NoP) concept and implement the revised Essential Health Services Package (EHSP) to improve access to quality healthcare at the primary level. The Ministry will also revise the private sector policy to help strengthen private sector collaboration to sustain lessons learnt from COVID-19 pandemic.

The Ministry will take advantage of the relatively stable macroeconomic environment brought by the implementation of the International Monetary Fund (IMF)-Supported Program to Ghana to leverage on government development agenda to improve health of the population.

The APOW will continue to adapt the Program Base Budget structure (PBB) which indicates performance, sector objectives and priorities, activities/operations and expected outputs and indicators. The document is in six chapters with chapter one being the introduction, chapter two the 2023 performance, chapter three 2024 priorities, chapter four 2024 action plan, chapter five 2024 budget and chapter six the performance assessment framework.

1.1 Vision, Goal and Health Policy objectives

Vision

The vision for the health sector is to have a healthy population for national development.

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

2023 PERFORMANCE

2.0 Summary of Key Achievements in 2023

As part of the Ministry's efforts to attain Universal Health Coverage (UHC) by 2030, the Ministry in 2023, outlined a number of activities in the UHC roadmap which are consistent with policies and strategies outlined in the HSMTDP (2022-2025) for implementation under the various budget programs. Below are the summaries of the key achievements chalked by the Ministry in 2023 under the various programs.

2.1.1 Management and Administration

The Ministry as part of its oversight responsibilities, organized annual Health sector policy dialogue to generate evidence for policy development and review in the health sector. Following this, a number of policies were developed and disseminated. Key Policies developed include the Health Financing Strategy to ensure efficient management and sustainability of financing for healthcare, the Pharmaceutical Traceability Strategy to increase visibility within the supply chain and ensure efficient tracking of medicines, the National Oxygen policy and the National Policy Guidelines for the Nursing and Midwifery Mentorship Program to improve career pathways for nurses and midwives. In addition, the evaluation of the National Health Care Quality Strategy was conducted to assess the impact of the strategy on health care service delivery.

The Ministry through the Ministry of Finance secured a credit facility of USD195.5m from the World Bank, Global Financing Facility (GFF), Foreign Commonwealth and Development Office (FCDO), Global Alliance for Vaccine and Immunisation (GAVI) and Canada under the Primary Healthcare Improvement Program to improve access and quality of care at the district level. In line with the program, the Ministry reviewed the Essential Health Services Package to focus on primary healthcare including preventive services. In addition, the Ministry generated evidence to support possible inclusion in the National Health Insurance Scheme (NHIS) Benefit Package, the screening of cervical cancer and diabetes, treatment of anemia and malaria, and prostate cancer services to improve access.

As part of the government's commitment to boost the local manufacturing of vaccines, the National Vaccine Institute has been established. To improve stewardship and oversight, the Boards for the National Vaccines Institute, National Blood Service, and the National Ambulance Service were inaugurated to improve governance.

The Ministry launched the National Diabetes Management Guidelines and hosted an International Conference on Nuclear Technology in Cancer Care, marking a significant step in cancer treatment innovation. Efforts to enhance the medical workforce were evident in the successful execution of the Pilot Clinical Mentorship Programme and the rollout of the Anti-Microbial Stewardship Programme using e-learning platforms. Another notable achievement was the transition of Bono Regional Hospital into a teaching hospital, expanding access to tertiary healthcare.

Additionally, the Ministry in 2023, developed a comprehensive National Test and Treat Guideline for COVID-19 aimed at standardizing and improving the management and treatment of COVID-19 cases across the country. Furthermore, the Clinical Laboratory Improvement Project was initiated, aiming to upgrade laboratory services nationwide.

National Health Insurance

As part of the NHIA's plan to increase coverage and provide financial protection for the poor, the NHIS Mobile App was updated to include additional modules such as the group enrollment and messaging. Active membership as of 31st December 2023 stood at 17.8 million representing 55% of a total population of 32.1million. The NHIA exceeded its target of 2.3million active card holding indigents by registering 2.9 million indigents.

As part of government's plans towards the attainment of UHC by 2030, the Ministry developed a National Non-Residence Visitors Health Insurance Policy to protect non-resident visitors in the country from high cost of medical care. The framework document on the National Non-Residence Visitors Health Insurance Policy as contained in the Health Insurance Act 2016 (Act 852) is ready for implementation.

Infrastructure

The Ministry completed the following projects; Construction of 5 health facilities in Elubo, Bogoso, Mpohor, Nsuaem and Wassa Dunkwa; upgrading of 1 public health facility in Akontombra in the Western North Region; Construction of 1 Regional Hospital at Sewua; construction of District Hospital at Konongo; modernization and equipping of Tetteh Quarshie Memorial Hospital, Kibi District Hospital, Aburi and Atibie Hospitals; Completed the reactivated hospital project sites at Fomena and Takoradi European Flats Staff Accommodation projects; construction of Treatment and Holding Centres at Dodowa, Cape Coast, Adaklu, Sewua, Kumasi South, Aflao, Elubo and Keta; rehabilitation of Fevers Unit at Korle Bu; construction of COVID-19 Isolation and Treatment Facilities at Korle Bu Teaching Hospital; construction of CHPS Compounds at Debiso, Tiawia and Nsutam.

2.1.2 Health Service Delivery

The Ministry continues to pursue its Universal Health Coverage goal of increasing access to quality essential health care and population-based services for all by 2030.

In view of this, the Ghana Health Service (GHS) successfully conducted 915 cataract outreach surgeries, restoring vision to individuals across the country, new oxygen plants and a CT Scan machine were acquired and installed at the Cape Coast, Tamale and Ho Teaching Hospitals to increase access to specialised services.

The Korle Bu Teaching Hospital (KBTH) also acquired a new MRI Chiller System for Radiology to enhance imaging services. KBTH also initiated the manufacturing of Hypertonic Saline, a critical resource for surgeries and Hyponatremia treatment, making it the sole manufacturing site in Ghana. Komfo Anokye Teaching Hospital (KATH) established a special operating room for children (KidsOR) to care for the unique medical needs of pediatric patients.

As part of efforts to improve the quality of healthcare to the population, the Christian Health Association of Ghana (CHAG) has institutionalised the SafeCare Quality Improvement Program and 34 healthcare facilities are on level 4 accreditation. The Korle-Bu Teaching Hospitals has attained ISO 15189 accreditation for Laboratory and ISO 15189:2012 accreditation for virology.

As part of efforts to improve access and quality of prehospital services, the National Ambulance Service (NAS) recruited, trained and deployed 155 Advanced Emergency Medical Technicians and 531 Basic Emergency Medical Technicians across the country. The Service also collaborated with the Ghana Armed Forces to recruit and train 70 Military Emergency Medical Technicians. The National Blood Service (NBS) disseminated two quality manuals, the National Strategy for Screening of

Donated Blood and Immuno-haematological Testing and Blood Safety Guidelines for Hospital Blood Banks, towards improving blood safety nationwide.

Table 1: Performance of some Health Service Indicators in 2021-2023

Service Indicators	Jan - Jun 2021	Jan - Jun 2022	Jan - Jun 2023
ANC Coverage	81%	77%	74%
% Registrants making 4 th Visits	85%	85%	87.10%
% Skilled deliveries	66%	64.00%	63.1
PNC Coverage	73.80%	69.40%	67.20%
Still birth rate	11.90%	11.40%	10.10%
Institutional Neonatal Mortality Rate	7.70%	7.20%	5.10%
Institutional Maternal Mortality Ratio	113.8	111.7	105.3
Infant Mortality Rate	8.70%	8.10%	8.20%
Under 5 mortality rate	9.6	9.6	10.70%
Penta 3 Coverage	99.00%	97.60%	93.50%
Yellow Fever - Children Vaccinated	96.30%	96.20%	84.50%
Treatment Outcomes Evaluation among New and Relapse TB patients	88.20%	87.00%	
Diabetes incidence rate	0.75%	0.73%	0.26%
Hypertension incidence rate	2.22%	2.48%	0.83%
Family planning acceptor rate	34.90%	34.60%	36.9
Institutional Malaria death per 100,000 population	0.28	0.24	0.21
Stunting among children	6.20%	6%	5.20%
Average response time to emergencies by Ambulances (target is 15 minutes)	0:21:26	0:20:03	0:21:20
Average case handling time (hrs) by Ambulance	02:05:30	02:09:40	02:17:50
Blood collection index (BCI) per 1000 population	5.7	5.8	5.8

2.1.3 Human Resource for Health Development

Human Resource remains an important pillar towards the attainment of the Sector's Universal Health Coverage (UHC) goal.

The Ministry has completed the 2023 admissions process for various programs into the Health Training Institutions. Eighteen (18) Nursing and Midwifery Training Schools have been accredited to run degree programs and the Ghana College of Nurses and Midwives (GCNM) developed 5 new curricula and commenced the fellowship program in 6 specialty areas (Oncology, Palliative, Emergency, Neonatal Care, Child & Adolescent mental Health), launched a 5-year Increase Gains in Nutrition by Integration, Education, Evaluation and Empowerment (IGNIT3) project with the Hospital for Sick Children (SickKids) in Canada to train healthcare workers in nutrition and WASH, and drafted a 10-year strategic plan. The Ghana College of Pharmacists established collaboration with the Tata Memorial Hospital, India, to train 3 candidates in Pediatric Oncology and collaborated with Auteurs Afrique to train 12 Pharmacist in the area of NCDs (Diabetes and Hypertension).

In addition, the college collaborated with Empower School of Health to train 300 Pharmacists on handling pharmaceutical waste. Ghana College of Physicians and Surgeons (GCPS) commenced

partnership activities with the Royal Colleges, UK in training of doctors and accredited Techiman Holy Family Hospital for Fellowship training.

2.1.4 Health Sector Regulation

Health regulation remains a major function of the Ministry to improve quality of care and protect public safety. In view of this, Health Facilities Regulatory Agency (HeFRA) licensed and certified primary health facilities in Greater Accra and Central regions as part of preparations towards the NoP implementation. HeFRA and Traditional and Alternative Medicine Practice Council (TMPC) digitized operations to increase access and improve efficiency.

The Pharmacy Council deployed nationwide, the National Electronic Pharmacy Platform to improve access to medicines. This Electronic Platform has been recommended for use by ECOWAS at a Regional Meeting held in Dakar to improve access to medicines and quality pharmaceutical care.

The Medical and Dental Council initiated processes to redesign, restructure, and harmonize the curricula of medical & dental training. The Food and Drugs Authority has been designated as a Regional Center of Regulatory Excellence for Vaccines Regulatory Oversight by the AUDA-NEPAD for all regulatory functions except for lot release of vaccines and is the first regulatory agency to be granted global approval for the R21 Malaria vaccine.

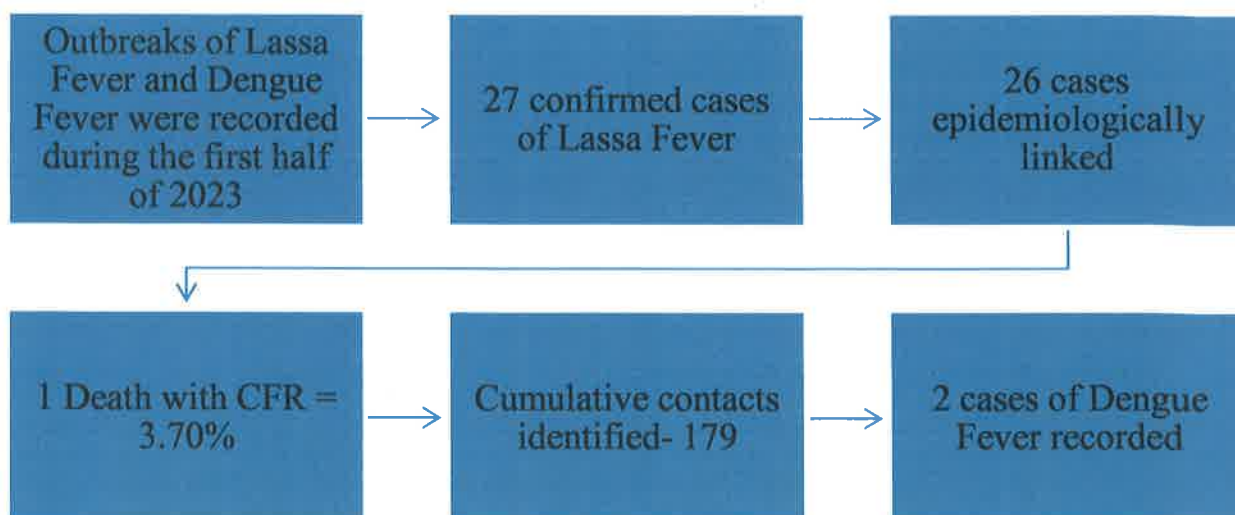
2.1.5 Pandemics, Epidemic, Outbreaks and others

The year 2023, the country experienced outbreak of Marburg, Lassa Fever, Dengue fever among other public health outbreaks in addition to COVID-19. However, the country did not experience high incidence of COVID-19 cases compared to 2022. The Table 2 below shows the status report on COVID-19 and Figure 1 shows recorded cases of other outbreaks.

Table 2: Confirmed cases of COVID-19 and Treatment Outcomes, Ghana as at 30 December 2023.

Category	Number of cases	Recovered/ Discharged	Severe	Critical	Dead	Active
Routine Surveillance	62,721	162,771	0	0	1,462	7
Enhanced Contact Tracing	101,519					
International travelers (KIA)	7,705	7,705				
Total	171,945	170,476	0	0	1,462	7

Figure 1: Other Public Health Outbreaks



2.2 Budget Performance For 2023

This section of the document indicates the 2023 budget performance of the Ministry highlighting the 2023 Ministry of Health approved budget, budget allotment ceiling and actual expenditures as at end of December 2023.

2.2.1 2023 Approved Budget

A total of GHC15.2b was approved for the Ministry of Health in the year 2023, however, the budget was revised upwards to GHC15.9b at the mid-term budget review. Government of Ghana (GoG) is the major source of funds for the sector and takes up 56.4% of the total budget. This is followed by Internally Generated Funds (IGF) 24.4%, Donor 18.8% and Annual Budget Funding Amount (ABFA) 0.40%. The table 3 shows the details of the approved budget.

Table 3: 2023 Approved Budget

Source of Funds	Compensation of Employees	Goods and Services	Capex	Total	% share
GoG	8,900,715,972	23,853,476	75,454,229	9,000,023,677	56.4%
IGF	524,096,512	2,790,770,640	572,059,002	3,886,926,154	24.4%
Donor		277,937,800	2,718,601,720	2,996,539,520	18.8%
ABFA			61,047,462	61,047,462	0.4%
TOTAL	9,424,812,484	3,092,561,916	3,427,162,413	15,944,536,813	100%

Source: 2023 Mid-year Budget Review

2.2.2 Budget Allotment Ceiling

Budget allotment ceilings represent quarterly budget allocations (GoG & ABFA) to the Ministry by the Ministry of Finance out of which budget may be released from. The Ministry of Health received a total budget allotment ceilings of GHC8.2b for GoG and ABFA. Out of the GHC8.2b, compensation constitutes 98.48%, goods & services 0.23% and capex 1.29%. The table 4 below shows the details of the budget allotment ceiling.

Table 4: 2023 Approved GoG Budget vs Budget Allotment Ceiling

Item	GoG Budget	Total Allotment	% Share
Compensation	8,900,715,972	8,073,683,837	98.48%
Goods & Services	23,853,476	18,815,008	0.23%
Capex (GoG & ABFA)	136,501,691	105,568,434	1.29%
Total	9,061,071,139	8,198,067,278	100%

Source: Implementation of Budget Allotment Ceilings - Quarter 1-4 2023.

2.2.3 Actual Expenditure as at December 2023

The table 5 below shows the details of actual budget expenditure as at December 2023. GoG remains the major financier of the sector comprising GHC9.4b representing 68% of the total health expenditure. Out of the total GoG expenditure, compensation of employees takes up 98.44% whereas Goods & Service and Capex constitutes 0.23% and 0.78% respectively.

IGF which is the second highest financier of the budget takes up GHC3.8b representing 28% of the total budget expenditure. The IGF Goods & Service expenditure of 75.71% is mostly used to supports service delivery.

The Donor Goods & Services budget execution of 177% may be due to off-budget expenditure. The low execution rate of Donor Capex expenditures may be due to delay in processes of claims.

The Ministry of Finance, in 2023, made transfer payments of GHC202m on behalf of the Ministry of Health under the office of Government Machinery budget to support the activities of the Ministry of Health.

Table 5: 2023 Budget Performance as at December 2023

SOURCE OF FUNDS	APPROVED BUDGET	ACTUAL EXPENDITURE	EXECUTION
GOG	9,061,071,139.00	9,423,673,945.00	104%
<i>Compensation</i>	8,900,715,972	9,276,323,397.00	104%
<i>Goods and Services</i>	23,853,476	21,768,917.00	91%
<i>Capital Expenditure</i>	75,454,229	73,753,549.00	98%
ABFA	61,047,462.00	51,828,082.00	85%
IGF	3,886,926,154.00	3,831,762,967.73	99%
<i>Compensation</i>	524,096,512.00	397,672,987.60	76%
<i>Goods and Services</i>	2,790,770,640.00	2,900,870,599.09	104%
<i>Capital Expenditure</i>	572,059,002.00	533,219,381.04	93%
DONOR	2,996,542,520.00	606,884,012.55	20%
<i>Goods and Services</i>	277,937,800.00	492,255,873.55	177%
<i>Capital Expenditure</i>	2,718,604,720.00	114,628,139.00	4%
Total	15,944,539,813.00	13,862,320,925.28	87%
NHIA		85,604,572.00	
Transfer from MOF to MOH under the office of Government Machinery Budget		202,093,324.00	

Source: 2023 MoF Budget Statement and Economic Policy and 2023 MoH Financial Statement

2.3 Challenges

During the fiscal year 2023, the Ministry faced a number of challenges. The following are some of the difficulties encountered during the fiscal year in question:

- Inadequate Budget Support- Consistently, the Ministry is unable to receive fully the approved GoG budget for Goods and Services and Capex. The GoG Goods & Service and Capex budgets approved for the sector is far lower than what is projected by the Ministry. For example, in 2024, the Ministry estimated a total budget of GHS4.5billion for GoG Goods & Service and GHS7.5billion Capex. This often results in accumulated unpaid bills (uncompleted projects, irregular supply of commodities), shortage of health commodities e.g., medicines and consumables and limited monitoring/supervision.
- Capping of NHIF and IGF of some Agencies- IGF is the main source of revenue for service delivery. However, some Agencies are capped by law thereby reducing available funds for service delivery. Besides the capping, there are some delays in the NHIS claims payment to health facilities which may affect supply of essentials health commodities and service delivery in general.
- Inadequate numbers and distribution of critical health professionals- Human resource management is a major challenge to the sector. Over the years, the Ministry has worked hard to improve the human resource base. However, equitable distribution and attracting and retaining critical staff, especially in deprived/remote areas remains a setback to the provision of quality health service delivery.
- Land encroachment remains a threat to facility expansion and quality service provision. For example, lands at Pantang, Ankaful, and other facilities have been taken over by private developers which leads to constant threat on health workers
- Fragmented health database system for health information resulting in inconsistent reporting on health indicators to support decision making.

CHAPTER THREE

3.0 PRIORITY AREAS FOR 2024

The Program of Work for 2024 will continue to consolidate the gains made so far in the priority areas of the 2022-2025 HSMTDP - Essential services for the population, Management of clinical and public health emergencies, improve quality of care and information management, enhance efficiency in human resource performance, Health policy, financing and system strengthening and Institutionalize reforms in sector effectiveness.

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 (95 95 95), 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
- Establish the Centre for Health Security (CHS)
- 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

- Improve provision of quality essential maternal health service
- Improve the quality-of-service delivery at all levels for ANC, intrapartum care, PNC, and newborn care
- Increase the quality and coverage of perinatal death audits
- Improve collection, entry, analysis, and utilization of data on NCDs in Ghana
- Strengthen the management and quality assurance of national laboratories and infectious disease centres
- Establish a system for the generation of nationally representative data
- Improve the quality-of-service delivery for the care of children
- Strengthen the management and quality assurance of medical equipment, laboratories, protocol and infectious disease centers
- Strengthen the Last Mile Distribution (LMD) system
- Strengthen Health Sector Procurement
- Strengthen Warehousing for Health Commodities
- Improve, standardize, and integrate financial and health information and supporting systems
- 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
- 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

- Strengthen governance system for improved performance

- Increase GoG revenue collection and allocation to the health sector

Institutionalize reforms in sector effectiveness

- Institutionalize quality standards and practices in the delivery of health services
- Establish sustainable programmes for prevention, screening and early detection of NCDs, including cancers
- Improve the quality-of-service delivery at all levels for ANC, intrapartum care, PNC, and new-born care
- Improve collection, entry, analysis, and utilization of data on NCDs in Ghana
- Strengthen and ensure compliance with referral processes and procedures between all levels of care
- Increase the use of Information and Communication Technology for Emergency Care and Surveillance
- 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

In addition to the above priorities the Ministry will also focus on –

- Local manufacturing of vaccines –
 - development of anti-snake venom and other vaccine through collaboration with private sector arrangement with the newly created National Vaccine Institute as its first step towards local vaccine production in Ghana and Sub-Sahara Africa
- Private sector collaboration to operationalize the newly established Bio-equivalent center which will lead to the production and export of herbal medicine, clinically tested for efficacy in Ghana
- Establishing the Center for Health Security to coordinate health emergency preparedness and response in the country.
- Implement the revised Essential Health Services Package (ESHP)

Capital Investment

Access to service delivery remains a challenge to effort towards the attainment of Universal Health Coverage. To help address this, the Government in 2024, will continue to improve Health infrastructure to help reduce barrier to access to health service by-

- commissioning the 100-bed ultramodern Urology and Nephrology Centre of Excellence at Korle Bu Teaching Hospital.
- Completing the following ongoing projects:
 - construction of 1 District Hospital at Salaga
 - reactivate, complete, and equip the Kumawu hospital project
 - construction of 12 Hospitals in Ashanti, Eastern, Ahafo and Greater Accra (Suame, Manso Nkwanta, Twedie, Drobonoso, Sabronum, Kwabeng, Achiase, Jumapo, Adukrom, Nkwatia, Mim and Kpone Katamanso)
 - refurbishment of Asawinso Health Centre as Treatment and Holding Centre in the Western North Region
 - construction, remodeling and refurbishment of Treatment and Holding Centre at Goaso, Ahafo

Region, Nalerigu North East Region, Takoradi Western Region and Sunyani in the Bono Region.

Pandemics, Outbreaks and others

In ensuring that pandemics, outbreaks and other health emergencies are detected early for effective management, the Ministry and its Agencies will continue to implement the proven interventions such as:

- 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 2024 ANNUAL ACTION PLAN

The Ministry's Budget Program structure has been aligned to the broad operations, expected outputs and targets for all Agencies. These have further been consolidated into a framework to guide the implementation of the Sector's planned activities for 2024 as indicated in Table 6 below.

Table 6: 2024 Action Plan

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4	
Management & Administration				Directors' meetings held	6	6	X	X	X	X	
				Staff durbars organized	4	4	X	X	X	X	
				Health commemoration days celebrated	8	8	X	X	X	X	
	General Administration		Strengthen governance system for improved performance	Improve Management of the sector	Training on Staff Performance Appraisal held	3	2	X	X	X	X
					Training for Staff on Retirement Planning held	1	2	X	X	X	X
					Staff Records digitalized	4	4	X	X	X	X
					Health bills and LIs developed	23	23	X	X	X	X
					Statutory meetings hosted	5	5	X	X	X	X
					Statutory meetings attended	6	6	X	X	X	X
	Health Research, Statistics and Information		Set up and make functional health systems research and	Strengthen Health Information Management System E-Health and LMIS coverage	NCDs data included in the national health information system	N/A	4	X	X	X	X
					National Health Database installed and deployed	N/A	4	X	X	X	X
					Monitoring visits to Health Electronic Medical Records System project sites conducted	N/A	4	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
	Management	innovation framework		New Health Electronic Medical Records System sites established	1	1	X	X	X	X
				National Telemedicine Policy developed						
				Infrastructure strategy document disseminated	N/A	1			X	
				National policy for Oxygen implemented	N/A	1	X	X	X	X
				National Policy for Oxygen disseminated	N/A	1			X	X
				Health Infrastructure Policy developed		1	X			
				Non-resident Health Insurance Policy Launched	N/A	1	X			
			Develop/Review of Policies	Traditional and Alternative Medicine Development Policy developed	N/A	1			X	
				National Human Resource Migration Strategy developed	N/A	1			X	
				National Genomic Surveillance Strategy developed	N/A	1			X	
				National Health Referral Policy and Implementation Guidelines developed	N/A	1			X	
				National Health Care Quality Strategy reviewed	1	1	X	X	X	
				National Geriatric Health Strategy developed	N/A	1			X	

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
				National Research Policy and Agenda developed	N/A	1		X		
				Health sector Gender Policy developed	N/A	1		X	X	
				Gender Action Plan developed		1			X	X
				Private Sector Policy developed	N/A	1		X		
				National Infection Prevention Control (IPC) developed	N/A	1			X	X
				Digital health policy developed	N/A	1		X	X	X
				Transport management policy developed	1	1		X	X	
				Staff welfare constitution developed	N/A	1			X	
				Organizational manual finalized	1	1		X	X	
			Improve oversight responsibility role	Inter- Agencies' meetings organized	4	4		X	X	X
				2025 Sector Programme Based Budget developed	1	1			X	X
			Budget development and Implementation	2023 Annual Budget Performance Reports produced	1	1	X			
				2024 Quarterly Budget Performance Reports produced	3	3	X	X	X	X
				4 Budget Committee meetings held	5	4	X	X	X	X
				4 Parliamentary Select Committee Meetings held	0	4	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
			Expenditure tracking	2017-2022 National Health Account document developed	N/A	1	X			
			Strengthen Sector Public Financial Management System	IGF Guideline developed	N/A	1	X		X	
			Coordinate Climate Change activities	Health National Adaptive Plan and policy (HNAP) developed	N/A	1		X	X	X
		Strengthen governance system for improved performance	Monitor and evaluate the sectors Programmes and Projects	Holistic Assessment report produced	1	1	X	X		
				Joint Monitoring reports produced	2	2		X		X
		Set up and strengthen institutions, including Centres for Health Security (Ghana)	Establish Centre for Health Security (CHS)	Inputs from Parliamentary Select Committee and Council of State into the Health Security Bill for Ghana secured	N/A	1		X	X	X
				Partnership framework with Development Partners on Health Security in Ghana developed	N/A	1		X	X	X
				CHS LI drafted	N/A	1		X	X	X
			Operationalisation of National	Microbiology Laboratory to test locally manufactured vaccines procured	N/A	1		X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
		CHS) to deliver responsive public health emergency services	Vaccine Policy	Communication Strategy for National Vaccine Institute developed	N/A	1	X	X	X	X
			Operationalisation of Bio-equivalent Centre	Public-Private Partnership frameworks to operationalise Bio-equivalent Centre developed	N/A	1	X	X	X	X
		Finance and Audit	Prepare financial statement for the sector	Quarterly Consolidated Financial Statements of the MOH prepared	4	4	X	X	X	X
			Compilation of Ministry of Health Consolidated Fixed Assets	Ministry of Health Consolidated Fixed Asset Register Compiled	4	4	X	X	X	X
			Validation of Financial Reports from MOH Agencies	Quarterly Reports of BMC Financials Validated	4	4	X	X	X	X
			Improve, standardize, and integrate financial and health information and supporting systems	Audit of Ministry of Health - Financial activities and	Annual Audit of Financials and Financial statement carried out.	3	3	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
			Financial Statements							
			Train Finance and Non-Finance managers on new Financial Reforms and Process (IPSAS, ATF, Fixed Assets and GIFMIS)	Finance and Non-Finance staff trained on IPSAS, ATF, Fixed Assets and GIFMIS	2	4	X	X	X	X
			Monitor and supervise Ministry of Health and its Agencies for Compliance to New Reforms and Compliance (IPSAS, ATF, Fixed Assets and GIFMIS)	Monitoring and Support Visit to selected BMCs carried out	3	4	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
			Development of SOPs and Accounting and Reporting Rules and Instructions (ATF, SOPs, Reporting Tool-IPSAS format, Transactional Tools for BMCs)	SOPs, ATF, IPSAS Report Tool and Transactional Tool Developed	1	4	X	X	X	X
			Train Finance Staff on ICT Accounting Tools and Reporting (Study Programmes)	SAGE and Advance Excel Training Course for Finance staff Attended	N/A	4			X	
			Financial Performance Review Meeting with Agencies	Bi - Annual Financial Performance Review carried out	N/A	2		X		X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
			Directors of Finance							
			Realign and update Health COA with CAGD (Public Accounts and GIFMIS)	Ministry of Health GIFMIS COA realigned and updated	N/A	1		X		
			Audit health sector activities and finances	Quarterly Audit reports	4	4	X	X	X	X
			Annual Audit report	Annual Audit report	1	1	X			
			Implement annual Health Sector Procurement Plan	Percentage of essential health commodities procured		65%	X	X	X	X
			Strengthen Health Sector Procurement	Percentage of traditional vaccines procured		100%	X	X	X	X
			Implement the Logistics Management Information System	Facilities implementing the LMIS		3,903	X	X	X	X
			Recruitment of health professionals	Visits to LMIS sites conducted		4	X	X	X	X
			Ensure the production, Human Resource for Health	Financial clearance received for recruitment of health professionals	24,438	40,000	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
	Management	equitable deployment, and retention of health workforce	Staff management improved	In-service training organized	4	8	X	X	X	X
			Develop Policy on Attraction and Retention of Health Workers to Deprived Areas	Scholarship nominations processed	25	55	X	X	X	X
				Districts categorized into Deprived, Mildly Deprived and Severely Deprived validated.	1	1		X	X	X
				Cabinet approval for attraction and retention package secured	N/A	1			X	X
				Review conditions of service for health workers	N/A	1	X	X	X	X
				Carry out Health Labour Market Analysis	The Health Labour Market Analysis Report finalized	1	1	X	X	X
				Develop and Disseminate Human Resource Productivity Manual	Human Resource Productivity Manual developed and disseminated	N/A	1	X	X	X
				Review Staffing Norm for	Staffing Norm for Primary Health Care reviewed	1	1	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
			Primary Health Care							
			Develop an Integrated Human Resource for Health Information System and train end-users	An Integrated Human Resource for Health Information System developed and end-users trained	1	1	X	X	X	X
			Skills Gap Analysis for the Health Sector	Skills Gap Analyses for the Health Sector completed.	1	1	X	X	X	X
			Develop the National Surgical Obstetric and Anaesthesia Plan for Ghana (NSOAP)	NSOAP plan developed	1	1	X	X	X	X
Health Service Delivery	Primary and Secondary	Strengthen Primary Health Care	Implement Networks of Practice	Availability and utilization of EmONC services improved	NA	100 facilities	x	x	x	x
				DLR 1.1 Number of Networks of Practice functioning according to standards for Networks of Practice	0	100	x	x	x	x

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
Health Services		(PHC) Systems at the lower level through the Network of Practice concept		DLR 1.2 Number of Model Health Centers functioning according to the Standards for Model Health Centers	0	100	x	x	x	x
				DLR 1.3 Number of Model Health Centers with a solar and/or battery electricity backup system	0	50	x	x	x	x
				DLR 2.1 Annual increase in the number of Health Centres and Model Health Centers that have available selected Essential Medicine in at least six (6) months of the year	0	100	x	x	x	x
				DLR2.2 Increase in the number of Physician Assistants at post in health centers	717	900	x	x	x	x
				DLR 2.3 Annual increase in the number of Networks of Practice that score Green on Community Scorecard for at least one quarter.	0	50	x	x	x	x
				DLR 2.4 Annual increase in the number of Networks of Practice that received at least one clinical support visit in each quarter from the District Hospital level	0	100	x	x	x	x

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
				DLR 6.1 Annual increase in the number of mother/newborn pairs receiving care in facilities providing Quality BEmONC services at the Sub-District level	0	50,000	x	x	x	x
				DLR 6.2 Annual increase in the number of new family planning acceptors utilizing services at the Sub-District and community levels	663,614	713,614	x	x	x	x
				DLR 6.3 Annual increase in the number of adolescents utilizing health services at the Sub-District and community levels	594,347	694,347	x	x	x	x
				DLR 6.4 Annual increase in number of children aged 0-23 months in Selected Districts who receive Penta1 vaccination	306,833	346,833	x	x	x	x
				DLR 6.5 Annual increase in number of hypertensive patients diagnosed at the Sub-District and community levels	110,834	120,000	x	x	x	x
		Set up and make functional Health Systems Research and Innovation	Health Systems Research - Annual Ghana Health Service Dissemination of Health	Number of health research findings disseminated	4	4	x	x	x	x

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
		Research Framework	Research Findings							
		Strengthen governance systems for improved performance	Complete review of Financial Management Platforms and fully implement them. Conduct Holistic assessment exercises (all BMCs)	Number of facilities using GFMIS for Financial transactions	N/A	16				x
		Increase the pre-service and in-service training of healthcare workers in the management of NCDs	Train teams in districts & sub-districts in the use of the Community Score Card	Findings from holistic assessment exercise disseminated	1	1				
				Regional, District and sub district teams trained on Community Score card	3	14	x	x	x	x

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
		Strengthen Community Engagement and Risk Communication for health promotion	Improve Social, Behavioural Change Communication at all levels to generate demand for vaccines.	Set up risk communication committees for pandemic preparedness/SBCC	N/A	261	x			x
		Strengthen Health Sector Procurement	Improve GhiLMIS system utilization through regular stakeholder engagements and monitoring	Increase GiLHMIS utilisation to 50%	25%	50%	x	x	x	x
		Establish sustainable programmes for prevention, screening	Implement SafeCare Quality Improvement program	Support 75% of the facilities (330) on the SafeCare improvement program to improve to the next level	224	248	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
		g, and early detection of NCDs, including cancers								
	Tertiary and Specialized Health Services	Increase the quality and coverage of perinatal death audits	Improve institutional Neonatal Mortality Rate	Neonatal deaths per 1,000 institutional live births	53.0/1000 LB	45.7/1000 LB	X	X	X	X
			Carry out maternal deaths audits	Number of maternal deaths audited divided by total number of maternal deaths multiplied by 100	100%	100%	X	X	X	X
			Improve stillbirth Rate	Number of babies born with no signs of life at or after 28 weeks of gestation per 1,000 live births	35.3/1000 TB	32.1/1000 TB	X	X	X	X
			Improve under-five mortality rate (per 1000lb)	Deaths occurring among children under 5 years per 1,000 live births	69.6/1000 LB	74.4/1000 LB	X	X	X	X
			Improve infant Mortality Rate (per 1000lb)	Deaths among children under 1 per 1,000 live births	59.2/1000 LB	58.2/1000 LB	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q1	Q2	Q3	Q4
			Conduct death audits and post mortem examination	Percentage of deaths audited	100 (Maternal Deaths only)	100 (Maternal Deaths only)	X	X	X	X
		Improve provision of quality essential maternal health service	Reduce institutional Maternal Mortality rates	Institutional maternal mortality rates per 100,000 live births	733.4/100,000LB	1105.4/100000LB	X	X	X	X
		Improve HIV services for the population	Improve HIV Prevalence (15-49 years)	Percentage of people tested in the age group who were found to be infected with HIV	1.32%	4.72%	X	X	X	X
		Increase the availability of essential health services packages across the continuum of care	Improve out-patient services	Percentage of reduction in waiting time	4%	10.50%	X	X	X	X
	Improve patients Admissions		Percentage increase in Admissions	25%	9.60%	X	X	X	X	X
			Re-admissions rate	< 5%	1.20%	X	X	X	X	X
			Improve specialist OPD services	Percentage increase in specialist OPD attendance	15	9.80%	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
		at all levels								
		Strengthen institutions to deliver responsive pre-hospital and clinical emergency services	Improve provision of Emergency Care Services	Case Response Time	10mins	1min	X	X	X	X
			Reduce post operative/procedural deaths	Percentage of post procedural deaths	≤1% of cases	≤1% of cases	X	X	X	X
			Conduct death audits and post mortem examination	Percentage of post procedural recoveries	≥95% of cases	≥95% of cases	X	X	X	X
			Improve diagnostic services	% .PM examination conducted	100%	100%	X	X	X	X
		Strengthen the Last Mile Distribution (LMD) system	Carry out outreach activities	% increase in Diagnostic Clients Seen	30%	12.30%	X	X	X	X
			Improve outcomes in service delivery	Number of Outreach activities	85	95	X	X	X	X
				% availability of essential drugs	92.50%	97%	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
		Increase the pre-service and in-service training of healthcare workers	Improve outcomes in residency training	Pass rate of residency	95	100	X	X	X	X
		Institutionalize quality standards and practices in the delivery of health services	Introduce new specialised services	80 Newton m3 Oxygen Plant installed, Old renal dialysis unit renovated and re-equipped, Digitization of bed in 18 Departments completed, Urology and Nephrology Centers operationalised by KBTH			X	X	X	X
		Integrate mental health services and their financing into the general health	Provision of rehabilitation services (Psychiatry)	Transesophageal ultrasound services, Liver scan diagnosis, Bronchoscopy, Radiotherapy, Oncology by UGMC services introduced			X	X	X	X
			Improve Psychiatric care	Percentage increase in the no. of Rehabilitation Cases seen	15%	18%	X	X	X	X
				Percentage increase in Psychiatric patient care	35.50%	38.50%	X	X	X	X
				Percentage increase in the no. of patients seen in the communities	30%	35%	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4	
		care system		Percentage increase in Psychiatric patient care			X	X	X	X	
				Percentage increase in the no. of patients seen in the communities							
				Persons with mental illness withdrawn from Public places (DZRAMDO Project)			X	X	X	X	
				Suicide prevention and Disaster Management policies developed					X	X	X
				Psychotropic medicines deployed on DHIMS 2					X	X	X
		Increase the availability of essential health services packages across the continuum of care at all levels	Improve patients Admissions	Percentage increase in Admissions	25%	9.60%	X	X	X	X	
				Re-admissions rate		< 5%	1.20%	X	X	X	X
		Strengthen institutions to deliver	Improve specialist OPD services	Percentage increase in specialist OPD attendance	15	9.80%	X	X	X	X	
				Improve provision of Emergency Care Services		Case Response Time	10mins	1min	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4		
		responsive pre-hospital and clinical emergency services	Reduce post operative/procedural deaths	Percentage of post procedural deaths	≤1% of cases	≤1% of cases	X	X	X	X		
			Conduct death audits and post mortem examination	Percentage of post procedural recoveries	≥95% of cases	≥95% of cases	X	X	X	X		
			Improve diagnostic services	% .PM examination conducted	100%	100%	X	X	X	X		
			Carry out outreach activities	% increase in Diagnostic Clients Seen	LABs17.7 %	LABs18.6 %	X	X	X	X		
					Imaging 23.8%	Imaging 25%						
			Strengthen the Last Mile Distribution (LMD) system	Improve outcomes in service delivery	% availability of essential drugs	Number of Outreach	5	5	X	X	X	X
						90%	97%	X	X	X	X	
						95	100	X	X	X	X	
			Increase the pre-service and in-service	Improve outcomes in residency training	Pass rate of residency							

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
		training of healthcare workers								
		Institutionalize quality standards and practices in the delivery of health services	Introduce new specialised services	Number of specialist services introduced	3	At least 2 specialist service	X	X	X	X
							X	X	X	X
		Integrate mental health services and their financing into the general health care system	Provision of rehabilitation services (Psychiatry) Improve Psychiatric care	Percentage increase in the no. of Rehabilitation Cases seen Percentage increase in Psychiatric patient care Percentage increase in the no. of patients seen in the communities Percentage increase in Psychiatric patient care Percentage increase in the no. of patients seen in the communities	15%	18%	X	X	X	X
					35.50%	38.50%	X	X	X	X
					30%	35%	X	X	X	X
							X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4	
				Persons with mental illness withdrawn from Public places (DZRAMDO Project)			X	X	X	X	
				Suicide prevention and Disaster Management policies developed		1	X	X	X	X	
				Psychotropic medicines deployed on DHIMS 2		1	X	X	X	X	
		Increase the availability of essential health services packages across the continuum of care at all levels	Improve access to Herbal medicines	Number of herbal medicines produced	636,024 bottles	800,000 bottles	X	X	X	X	
				No. of Herbal medicines formulated/Reformulated	3	6	X	X	X	X	X
				No. of Herbalist products analyzed	380	650	X	X	X	X	X
				No. of Efficacy studies	5	12	X	X	X	X	X
				No. of Toxicity Studies	6	8	X	X	X	X	X
				Increased in cultivation of medicinal plants		28.01 acres	50 acres	X	X	X	X
		Develop an investment case for the health sector	Enhance support for research in the health sector	No. of research publications produced	10	18	X	X	X	X	
				No. of research proposals developed	14	16	X	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4	
		Strengthen institutions to deliver responsive pre-hospital and clinical emergency services	Improve Ambulance Services Availability	No. of Functional Ambulances	500	600	X	X	X	X	
				No. of ambulances procured	200	100	X	X	X	X	
				No. of Cases Handled	38,393	40,000	X	X	X	X	
				Average Response Time improved	20.27	20	X	X	X	X	
				No. of trained EMTs	393	530	X	X	X	X	
				Percentage of voluntary unpaid blood donations (nationwide)	30%	40%	X	X	X	X	
			Increase voluntary unpaid blood donations	Percentage of voluntary unpaid blood donations (Zonal Blood Centres)	Percentage of voluntary unpaid blood donations (Zonal Blood Centres)	50%	54%	X	X	X	X
					No. of voluntary mobile sessions	810	929	X	X	X	X
					No. of educational talks on blood donations organized	2,108	2,200	X	X	X	X
					Blood collection index (BCI) per 1000 population improved	5.8	6.2	X	X	X	X
					Percentage of whole blood donations separated into components	25.80%	33%	X	X	X	X
					No. of residents in accident-prone areas trained and certified		6,000	X	X	X	X
					No. of basic school pupils trained in first aid		13,000	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
					46 Associates	71 Associates	X	X	X	X
						5 Fellows	X	X	X	X
					540 Members	450 Members	X	X	X	X
			Admission and training of specialist health professionals	No. of Resident Doctors admitted	100 Fellows	140 Fellows	X	X	X	X
				No. of Resident Pharmacists admitted	37	50	X	X	X	X
				No. of Resident Nurses admitted	326	420	X	X	X	X
			Continuous Professional Development (CPD) programs	Number of CPDs conducted (Doctors)	35	45	X	X	X	X
				Number of CPDs conducted (Pharmacists)	6	10	X	X	X	X
				Number of CPDs conducted (Nurses/ Midwives)	12	15	X	X	X	X
				No. of mortuaries and funeral facilities registered (MoFFA)	95	100	X	X	X	X
			Registration of facilities	No. of practitioners registered (MoFFA)	N/A	300	X	X	X	X
				No. of Pharmacies registered (PC)	868	1000	X	X	X	X
				No. of OTCMS shops registered (PC)	2259	2500	X	X	X	X
				No. of mortuaries and funeral facilities inspected (MoFFA)	95	95	X	X	X	X
			Inspection of facilities	No. of inspection visits to new facilities conducted (HeFRA)	1,385	1,602	X	X	X	X
				No. of inspection visits to pharmacy facilities (PC)	24000	19,000				
Health Sector Regulation	Regulation of Health Facilities	Strengthen the health regulatory bodies for improved efficiency								

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4			
			Licensing of facilities	No. of mortuaries and funeral facilities licenced (MoFFA)	95	95	X	X	X	X			
				No. of new health facilities licensed (HeFRA)	1,950	1,119	X	X	X	X			
				No. of facilities licenses renewed (HeFRA)	1,300	886							
				No. Pharmacy licenses renewed (PC)	4,382	4,000							
				No. OTCMS licenses renewed (PC)	19,026	18,000							
				No. of facilities monitored (HeFRA)	1,000	450							
			Monitoring of facilities	MOFFA website created	1	1	X	X	X	X			
				PC website updated with practitioner and facility renewal portals	1	2	X	X	X	X			
				PC facility inspections & monitoring done on a digitized platform	-	1	X	X	X	X			
			Digitize operations of MOFFA & HeFRA	PC practitioner enrolment into training institution digitized	-	1	X	X	X	X			
				No. of Mobile Online Operational Systems developed and Operationalised (HeFRA)	1	1	X	X	X	X			
			Training of practitioners			Enforce standard of Practice enforced	Number of practitioners trained (MoFFA)	100	50	X	X	X	X
							No. of Psychologists in good standing re-licensed	1,453	2,053	X	X	X	X
No. of Pharmacists in good standing re-licensed	6,300	5,500					X	X	X	X			

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
	Professionals	and practices in the delivery of health services		No. of Nurses & Midwives in good standing re-licensed	157,898	175,003	X	X	X	X
				No. of Doctor re-licensed	8,080	5,815	X	X	X	X
				No. of Physician Assistants re-licensed	4,800	16,406	X	X	X	X
				No. of Allied Health Professionals in good standing re-licensed	13,672	28,327	X	X	X	X
				No. of health facilities supervised	25,250	50	X	X	X	X
				No. of training institutions supervised by GPC	45	3,654	X	X	X	X
				No. of new Doctors accredited	2,450	1,790	X	X	X	X
				No. of new Physician Assistants accredited	1,670	36,230	X	X	X	X
				No. of new Nurses/Midwives accredited	32,607	36,230	X	X	X	X
				No. of new Pharmacists accredited	500	500	X	X	X	X
				No. of Pharmacy Technicians accredited	600	600	X	X	X	X
				No. of new Allied Health Professionals accredited	6,402	8,002	X	X	X	X
				No. of new Psychologists accredited	250	260	X	X	X	X
No. of CPDs conducted	578	642	X	X	X	X				
				No. of Medical Training Institutions accredited	120	130	X	X	X	X

Program	Sub-Program	Broad Operations (HSM/DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
		workers								
		Institutionalize quality standards and practices in the delivery of health services	Accredit facilities for Specialized Health Training	No. of Nurses & Midwifery Training Institutions accredited	72	88	X	X	X	X
				No. of Pharmacy Training Institutions	7	7	X	X	X	X
				No. of Allied Health Training Institutions accredited	12	15	X	X	X	X
			Introduce Virtual Counselling	Policy on Virtual Counselling (Telepsychology) developed by GPC	N/A	1	X	X	X	X
			Develop scope of practice	Draft Scope of Practice document developed by MDC	N/A	1	X	X	X	X
		Increase the availability of essential health services packages across the continuum of care at all levels	Implement e-Pharmacy services	No. of facilities implementing e-Pharmacy under the NoP	N/A	1	X	X	X	X
				No. of NHIA clients with prescription served remotely	N/A	1	X	X	X	X
				No. of manufacturing facilities licensed	471	518	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
			Licensing & registration of medical products	No. of storage facilities licensed	226	228	X	X	X	X
			Conduct Product quality monitoring of medical products	No. of products registered	9,813	10,794	X	X	X	X
			Safety Monitoring of Medical Products	Percentage of products that passed testing.	57%	80%	X	X	X	X
			Quality control testing and market surveillance of medical products	Number of adverse effect reports received.	2,220	1,841	X	X	X	X
			Licensing & registration of food products	Percentage of medical products tested	89%	85%	X	X	X	X
				No. of outlets visited	13,361	14,697	X	X	X	X
				No. of manufacturing facilities licensed	1,650	1,815	X	X	X	X
				No. of storage facilities licensed	401	441	X	X	X	X
				No. of products registered	8,417	9,259	X	X	X	X

Program	Sub-Program	Broad Operations (HSMT DP)	Operations	Expected Output	Baseline	2024 Target	Q 1	Q 2	Q 3	Q 4
			Conduct product quality monitoring of food products	Percentage products passed testing.	-	80%	X	X	X	X
			Quality control testing and market surveillance of food products	Percentage of food products tested	95%	85%	X	X	X	X
				No. of outlets visited	12,952	14,247	X	X	X	X
			Permitting of food service establishments and street food vendors.	Number of food hygiene permits issued.	1,220	1,342	X	X	X	X
			Monitoring of iodation of salt	Number of permits issued	1,149	1,264	X	X	X	X

CHAPTER FIVE

5.0 2024 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%, 6.71% and 6.0% percent in 2019, 2020, 2021, 2022, 2023 and 2024 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 (2019-2024).

5.1 Breakdown of 2024 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.

5.2 2024 Approved Budget

The total approved health sector budget for 2024 is GHC15.58 billion. Comparing to 2023, there was a 2.30% decrease (nominally) in the budgetary allocation. GoG remains the main source of funding contributing 70%, and other sources are IGF 26%, and Donor 4%. Overall Compensation of employee accounts for 72% of the budget, Goods and services 23% and Capex 5%. Even though Government remains the major financier 98% of its total budget of GHC10.93billion goes into payment of emoluments whiles Goods and Services and Capex account for 0.67% and 1.33% respectively. An amount of GHC708,780,000 (6.62%) is ring-fenced in the compensation budget for the payment of Nursing training allowance. Table 7 below indicates the 2024 approved budget for the Ministry of Health.

Table 7: 2024 Approved Budget by Source of Funding

Source of Funds	Compensation of Employees	Goods & Services	Capex	Totals
GOG	10,709,685,455	73,031,179	145,000,000	10,927,716,634
<i>O/w Headquarters & Agencies</i>	<i>10,000,905,455</i>	<i>65,343,054</i>	<i>80,000,000</i>	<i>10,146,248,509</i>
<i>Nursing Trainee Allowances</i>	<i>708,780,000</i>	-	-	<i>708,780,000</i>
<i>Mental Health</i>	-	<i>5,165,625</i>	-	<i>5,165,625</i>
<i>Ghana Psychology Council</i>	-	<i>2,522,500</i>	-	<i>2,522,500</i>
<i>Health Infrastructure</i>	-	-	<i>50,000,000</i>	<i>50,000,000</i>
<i>E-Health Projects</i>	-	-	<i>15,000,000</i>	<i>15,000,000</i>
ABFA	-	-	-	-
IGF	568,551,044	3,026,123,356	451,301,445	4,045,975,845
DONOR	-	477,835,750	125,709,049	603,544,799
TOTALS	11,278,236,499	3,576,990,285	722,010,494	15,577,237,278

The Table 8 below shows the allocation of the 2024 budget to the four Health Budget Programmes. As per the allocation, service delivery which is the core function of the Ministry constitutes 74% of the total budget allocation. Management and Administration constitutes 20% which includes GoG and Donor capital investment votes.

Table 8: Breakdown of 2024 Budget by Budget Programs

Budget Program	Source of Fund			Total	% Alloc ation
	GOG	IGF	DONOR		
Management and Administration	3,059,760,658	23,660,050		3,083,420,708	20%
Health Service Delivery	7,212,292,978	3,779,557,245	603,544,799	11,595,395,022	74%
Human Resource for Development	437,108,665	161,839,034		598,947,699	4%
Health Sector Regulation	218,554,333	80,919,517		299,473,850	2%
Total	10,927,716,634	4,045,975,845	603,544,799	15,577,237,278	100%

5.3 2024 Budget Gap Analysis

The total budget projected need for 2024 is GHC25.46billion for all economic classification. Total projected Compensation is GHC12.76billion, Goods & Service GHC5.02billion and Capex GHC7.68billion. However, total approved budget to the Ministry is GHC15.58billion leaving a gap of GHC9.88billion. Comparing the gaps, Capex constitutes 70% (GHC6.95billion) of the total gap. This implies in the year 2024, the Ministry needs suspend new capital investment projects and focus on completing ongoing ones. The projected Goods & Services need of GHC5.02billion does not include co-financing obligations which will be discussed later in the document. Table 9 below shows details of need, provision and gap.

Table 9: 2024 Budget Gap Analysis

Item	GoG	IGF	Donor	Total Need	2024 Provision	Gap
Compensation	12,100,146,635	657,546,544	-	12,757,693,179	11,278,236,499	1,479,456,680
Goods & Service	1,226,980,534	3,318,175,090	477,835,750	5,022,991,374	3,576,990,285	1,446,001,089
Capex	6,726,994,014	823,277,360	125,709,049	7,675,980,423	722,010,494	6,953,969,929
Total	20,054,121,183	4,798,998,994	603,544,799	25,456,664,976	15,577,237,278	9,879,427,698

5.4 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 2024, a total of USD25m has been projected as co-financing requirement for the Ministry of Health of which GAVI co-financing requirement constitutes 79.5%, Global Fund co-financing requirement 16.5% and replenishment commitment 4%. The National Health Insurance Fund (NHIF) has been the main source of funding for co-financing over the years. It is therefore expected that an allocation will be made for 2024 co-financing in the NHIF allocation formular. The challenge however, has been the inability of the allocation to cover the total co-financing requirement. The table 10 below shows the details of the 2024 co-financing budget.

Table 10: 2024 GoG Co-Financing Obligations

Activity	Budget (USD)
Gavi Co-Financing - 2024	19,893,062
o/w Co-financing obligation for vaccines and devices	10,093,062
o/w Cost of Traditional vaccines and devices	9,800,000
Global Fund Co-Financing - 2024	4,129,223
Co-financing malaria/RSSH	4,129,223
Total 2024 (Gavi + GF)	24,022,285
Replenishment commitment	1,000,000
Total Requirement (Total 2024 + Replenishment)	25,022,285

2024 Resource Mobilization

It is expected that in 2024, the Ministry in collaboration with the Ministry of Finance will continue to work with World Bank and other stakeholders to implement 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. Annex 6 provides details of the possible additional funding for the Sector in 2024.

CHAPTER SIX

6.0 PERFORMANCE ASSESSMENT FRAMEWORK

6.1 Sector Monitoring and Evaluation

Monitoring and evaluation are still important components of assessing sector performance. The 2024 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 2024 APOW monitoring. In 2024, the DHIMS will serve as the primary source of data for monitoring and evaluating the sector. The HSMTDP milestones agreed upon for 2024 will be closely monitored as well. Table 11 represents the Health Sector indicators and targets for the medium term:

Table 11: Monitoring & Evaluation Framework/Matrix for the 2022-2025 HSMMDTP

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			
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	Process	N/A	50	60	70	80	1. Region	2 MoH Relevant Agencies
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			

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

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	2	1. Facility type 2. District 3. Region	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	2	1. Facility type 2. District 3. Region	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	2	1. Facility type 2. District 3. Region	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	2	1. Facility type 2. Geographic region (district/region)	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	2	1. Facility type 2. Geographic location (district/region)	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 Quality Data 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	Process		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	Process	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	Process	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 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 HSMTP and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMTP and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMTP and reported produced	Holistic assessment conducted, focusing on outcome and impact indicators in the HSMTP 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	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	Process	No existing policies	40	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	Process	Current health policies to be reviewed	40	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	13	15		1	MOH
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	Outcome	38 (WHO NHA database, 2018)	36	32	30		1	MOH

² Ghana | PHCPI (improvingphc.org)

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 (comprises 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				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	Process	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)	Output	50	60	70	80	90	1. Facility type 3. Geographic location (district/region)	2	MOH GHS
Percentage of facilities with basic medical equipment	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	Process	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	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	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	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	Targets				Hospital type (district, region)	2	Relevant service delivery Agencies
				2022	2023	2024	2025			
				0.7	0.8	0.9	1	1. Hospital type (district, region) 2. Geographic location (district/region)	2	MOH GHS
Midwife to WIFA population equity index (Geographical)	Best performing region Midwife to WIFA ratio divided by Worse performing region Midwife to WIFA ratio	Outcome	0.6					1. Hospital type (district, region) 3. Geographic location (district/region)	2	
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/district. 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/macerated)	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 Pentavalent 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

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

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

Indicator	Outcome	47.3	73.5	74.5	76	85.5	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						1. Region 2. District 3. Sex 3. Age	
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	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	7 (MICS 2011)	6.8	6.5	6.2	6	1. Degree (moderate/severe) 2. Region 5. District	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	18 (MICS 2011)	16	14	12	10	1. Degree (moderate/severe) 2. Region 3. District	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	4 (GMHS 2017)	4	4	3	3	1. Region 2. District 3. Age	GSS
Under-five mortality rate (per 1000lb)	Deaths occurring among children under 5 years per 1,000 live births	60 (GDHS)	55	50	45	40	1. Region 4. District	Relevant Service Delivery Agencies
Infant Mortality Rate (per 1000lb)	Deaths among children under 1 per 1,000 live births	41(GDHS)	38	35	32	28	1. Region 2. District	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 aged 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 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)	64.1	69.4	74.7	80	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
Average response time to emergencies	Amount to time taken to receive, activate and respond to emergency medical services request	Output	22.43	2022	2023	2024	2025	1. Region 1. District	2	NAS
				19:43	16:43	13:43	10:43			

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			
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	Process	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	Process	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
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	2022	2023	2024	2025	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			

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	<ol style="list-style-type: none"> 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
Proportion of encounters with antibiotics prescribed	Number of patient encounters with antibiotics divided by total number of sampled prescriptions, multiplied by 100	Outcome	21	2022 18	2023 15	2024 13	2025 10	<ol style="list-style-type: none"> 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	<ol style="list-style-type: none"> 1. Hospital type (district, region) 2. Geographic location (district/region) 	2	MoH Relevant service delivery agencies

6.2 Milestones

Health Policy Objectives	2023 Milestones
<p>HO1: Universal access to better and efficiently managed quality healthcare services</p>	<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.
<p>HO2: Reduced avoidable maternal, adolescent and child deaths and disabilities</p>	<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
<p>HO3: Increase access to responsive clinical and public health emergency services</p>	<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

ANNEXES

Annex 1: 2024 Summary of Expenditure by Agencies, Economic Classification and Source of Funding

Agencies	GoG				IGF				ABFA			Donors			Grand Total		
	Compensation of Employees	Goods & Services	Capex	Total	Compensation of Employees	Goods & Services	Capex	Total	ABFA	Goods & Services	Capex	Total	ABFA	Goods & Services		Capex	Total
Ministry of Health	10,709,685,455	73,031,179	145,000,000	10,927,716,634	568,551,044	3,026,123,356	451,301,445	4,045,975,845	-	477,835,750	125,709,049	603,544,799	-	477,835,750	125,709,049	603,544,799	15,577,237,278
Health Headquarters	1,341,878,818	29,743,054	145,000,000	1,516,621,872	2,578,803	32,685,859	1,289,401	36,554,063	-	477,835,750	125,709,049	603,544,799	-	477,835,750	125,709,049	603,544,799	2,156,720,734
National Blood Service	7,274,766	1,000,000	-	8,274,766	2,578,803	9,025,809	1,289,401	12,894,013	-	-	-	-	-	-	-	-	21,168,779
Ghana Health Service (GHS)	6,146,026,520	25,000,000	-	6,171,026,520	189,381,263	1,042,676,251	36,672,046	1,268,729,560	-	-	-	-	-	-	-	-	7,439,756,080
Accra Psychiatric Hospital	43,209,881	2,401,201	-	45,611,082	1,157,298	4,050,543	578,649	5,786,490	-	-	-	-	-	-	-	-	51,397,572
Pantang Hospital	34,602,554	2,709,323	-	37,311,877	1,850,660	12,954,619	3,701,320	18,506,599	-	-	-	-	-	-	-	-	55,818,476
Ankaful Hospital	14,370,761	2,055,101	-	16,425,862	844,178	4,220,889	562,785	5,627,852	-	-	-	-	-	-	-	-	22,053,714
Christian Health Association of Ghana	1,558,738,776	-	-	1,558,738,776	153,125,691	788,169,008	176,389,439	1,117,684,138	-	-	-	-	-	-	-	-	2,676,422,914
Food and Drugs Authority	48,764,192	-	-	48,764,192	52,572,147	87,620,245	35,048,098	175,240,490	-	-	-	-	-	-	-	-	224,004,682
Medical and Dental Council	1,516,685	-	-	1,516,685	2,079,325	16,010,805	2,703,123	20,793,253	-	-	-	-	-	-	-	-	22,309,938
Nurses and Midwives Council	10,590,305	-	-	10,590,305	5,351,364	32,108,183	22,743,296	60,202,843	-	-	-	-	-	-	-	-	70,793,148
Pharmacy Council	4,522,544	-	-	4,522,544	2,553,354	14,894,567	3,830,032	21,277,953	-	-	-	-	-	-	-	-	25,800,497
Traditional Medicine Practice Council	3,073,951	-	-	3,073,951	736,274	1,008,823	1,200,000	2,945,097	-	-	-	-	-	-	-	-	6,019,048
Allied Health Professions Council	2,182,784	-	-	2,182,784	1,013,863	7,369,245	1,233,784	9,616,892	-	-	-	-	-	-	-	-	11,799,676
Health Facility Regulatory Agency	8,181,970	400,000	-	8,581,970	1,098,636	5,379,528	1,098,636	7,576,800	-	-	-	-	-	-	-	-	16,158,770
Psychology Council	854,869	2,522,500	-	3,377,369	209,546	1,176,681	225,665	1,611,892	-	-	-	-	-	-	-	-	4,989,261
National Vaccine Institute	5,000,398	-	-	5,000,398	-	-	-	-	-	-	-	-	-	-	-	-	5,000,398
Korle Bu Teaching Hospital	429,624,382	-	-	429,624,382	27,239,483	244,087,943	29,269,252	300,596,678	-	-	-	-	-	-	-	-	730,221,060
Komfo Anokye Teaching Hospital	220,695,166	-	-	220,695,166	30,638,647	148,816,283	39,392,546	218,847,476	-	-	-	-	-	-	-	-	439,542,642
Tamale Teaching Hospital	183,691,993	-	-	183,691,993	9,599,470	47,997,352	6,399,647	63,996,469	-	-	-	-	-	-	-	-	247,688,462
Cape Teaching Hospital Parent	115,609,151	-	-	115,609,151	5,510,707	46,841,013	2,755,354	55,107,074	-	-	-	-	-	-	-	-	170,716,225
Teaching Hospitals -Ho Teaching Hospital	66,932,960	-	-	66,932,960	8,490,473	42,452,364	5,660,315	56,603,152	-	-	-	-	-	-	-	-	123,536,112
University of Ghana Medical Centre	88,896,394	-	-	88,896,394	21,392,642	93,752,771	27,472,200	142,617,613	-	-	-	-	-	-	-	-	231,514,007

Agencies	GoG			IGF			ABFA			Donors			Grand Total
	Compensation of Employees	Goods & Services	Capex	Total	Compensation of Employees	Goods & Services	Capex	Total	Goods & Services	Capex	Total		
Health Training Institutions	190,209,329	-	-	190,209,329	35,785,017	254,555,138	33,572,196	323,912,351	-	-	-	514,121,680	
Ahmadiyya Muslim Health Service-Ghana	32,397,158	-	-	32,397,158	4,236,118	19,768,551	4,236,118	28,240,787	-	-	-	60,637,945	
Centre for Scientific Research into Plant Medicine	29,269,924	-	-	29,269,924	5,736,778	49,318,081	5,934,145	60,989,004	-	-	-	90,258,928	
National Ambulance Service	150,546,305	5,000,000	-	155,546,305	-	-	-	-	-	-	-	155,546,305	
St. Johns Ambulance Brigade	2,392,373	200,000	-	2,592,373	38,404	409,150	32,491	480,045	-	-	-	3,072,418	
Ghana College of Physicians and Surgeons	925,020	-	-	925,020	3,829,608	16,594,970	5,106,145	25,530,723	-	-	-	26,455,743	
College of Pharmacists	657,235	-	-	657,235	168,339	2,522,661	880,000	3,571,000	-	-	-	4,228,235	
Mortuaries and Funeral Facilities Agency	827,145	2,000,000	-	2,827,145	35,250	246,750	70,500	352,500	-	-	-	3,179,645	
Mental Health Authority	3,195,509	1,000,000	-	4,195,509	-	-	-	-	-	-	-	4,195,509	
College of Nurses and Midwives	2,697,559	-	-	2,697,559	1,297,705	8,435,082	3,244,263	12,977,050	-	-	-	15,674,609	

Annex 2 Capital Investment Plan

ITEM	TITLE OF PROJECT		GHC145,000,000.00
	GOG		
A. ARREARS ON CERTIFICATES UNPAID AS AT SEPTEMBER 2023			
1	Provision for arrears from 2022-2023 in the sector		15,367,302
	Sub Total		15,367,302
B. PROJECTS REQUIRING MATCHING FUNDS			
2	Rehabilitation of Bolgatanga Regional Hospital -SAUDI Projects Phase III		
3	Completion of the remaining 4No. of Housing Component under the Major Rehabilitation and Upgrading of Tamale Teaching Hospital Housing Project Phase II		2,500,000

ITEM	TITLE OF PROJECT	GHC145,000,000.00
		GOG
4	Project Preparation	5,000,000
5	Compulsory Acquisition of the Land Fronting Pantang Hospital	15,000,000
6	Healthcare Equipment Management and Maintenance - AGHA C4H Project	3,000,000
7	JICA Supported Project at Tamale Central Hospital for the Northern Region	2,000,000
	Sub Total	27,500,000
D. ON GOING PROJECTS WITH HIGH SOCIAL PROTECTION IMPACT		
8	Completion of 15 ongoing CHPS Compounds in 2018	2,155,810
9	Completion of 26 CHPS Compounds in 2019	7,560,000
10	Completion of 6 CHPS Compounds in 2022	7,500,000
11	Construction of 5 CHPS Compounds in 2023	5,600,000
12	Construction of Health Centre at Mempeasem in the Greater Accra Region	1,791,100
13	Rehabilitation of Cape Coast Teaching Hospital Accident & Emergency Unit	1,969,630
14	Completion of Hostel block and External Works at Cape Coast NTC	1,384,472
15	Completion of Nsawora Health Centre in the Sefwi Akontombra District	1,000,000
16	Rehabilitation of Diabetes Management, Research and Training Center at Korle-Bu Teaching Hospital	1,681,450
17	Construction of Fencewall at Pantang Hospital	1,000,000

ITEM	TITLE OF PROJECT	GHC145,000,000.00
		GOG
18	Completion and equipping of Pankrono Health Centre	1,000,000
19	Renovation of Korle-bu Ministry of Health SSNIT Flat Staff Accommodation - Court 7B and 9B	1,000,000
20	Supply of Vehicles and Office Furniture and Computers for MOH and GHS HQ	8,000,000
21	Treatment and Holding Centre at Takoradi	10,257,211
22	Supply and Installation of Equipment for CHPS Compounds initiated in 2018/2019 and other specialised hospital facilities	10,000,000
23	Treatment and Holding Centre at Nalerigu	7,500,000
24	Treatment and Holding Centre at Sunyani	10,733,025
25	E-health Project	15,000,000
	Sub Total	95,132,698
E. GHS ON- GOING PROJECTS WITH HIGH SUNK COST AND HIGH SOCIAL PROTECTION IMPACT		
26	Completion and Equipping of Nationwide CHPS Compound initiated in 2012 by GHS	2,000,000
27	Renovation of Korle-bu GHS SSNIT Flat Staff Accommodation	5,000,000
	Sub Total	7,000,000
	Grand Total	145,000,000

Annex 3: Procurement Plan

Procurement Contract Package	Estimated Amount (GHS)	Source of Funds	Procurement Method
JICA Supported Project at Tamale Central Hospital for the Northern Region	1,621,300	ABFA	National Restricted Tendering
Renting of TCMS Warehouse for MOH through Single Sourcing	4,500,000	GoG	Single Source Tendering
Procurement of 10 pieces Laptops and 10 pieces of All-In-One Desktops for CMS and PSCD to support GHILMIS through Restricted Tendering	731,400	Worldbank	National Restricted Tendering
Procurement of Test Kits and Consumable, TB and MDR Real Time PCR Kit (3840); Calibration Kit	58,512,000	Worldbank	National Restricted Tendering
Procurement of Contraceptives - Male Condom (No Logo) for WAHO, Qty 15,426,810 through International Competitive Tendering	601,640	WAHO	International Competitive Tendering
Procurement of Health Commodities Antiretroviral (ARV's) through International Competitive Tendering	18,401,400	GFGOG	Single Source Tendering
Procurement of Health Commodities Anti Malaria through International Competitive Tendering	3,788,200	GFGOG	Single Source Tendering
Procurement of Contraceptives - Male Condom (No Logo) through International Competitive Tendering	7,079,525	GFGOG	Single Source Tendering
Procurement of Anti-Malaria	7,385,411	GFGOG	Single Source Tendering
Procurement of Contraceptives	304,700	WAHO	International Competitive Tendering
Supply of additional probes (50 Units) for Wisonic Ultrasound machine originally procured for diagnostic of lung and cardiac pathology in COVID-19 disease	2,700,000	Worldbank	Single Source Tendering
Procurement of Medical Equipment for Primary Health Facility (Completed CHPS Compound) through Single Sourcing Procurement Procedures	11,775,720	Worldbank	Single Source Tendering
Procurement of 20,000 Examination Gloves (Various Sizes) Through Restricted Tendering	5,851,200	Worldbank	National Restricted Tendering
Procurement of Ultrasound Scanner Machine Consumables (Ultrasound Gel) 5,500 packs of 1kgx6 through Restricted Tendering	5,851,200	Worldbank	National Restricted Tendering

Procurement Contract Package	Estimated Amount (GHS)	Source of Funds	Procurement Method
Procurement of 130 Units Materials Handling Equipment (Pallet Jacks) for Central and Regional Medical Stores Through Restricted Tendering	5,851,200	Worldbank	National Restricted Tendering
Engagement of a firm to provide Security Services at MOH	1,650,000	GoG	Single Source Tendering
Procurement of Infection Prevention Commodities	36,570,000	Worldbank	National Restricted Tendering
Procurement of HIV Commodities through International Competitive Tendering	6,724,406	WAHO	International Competitive Tendering
Procurement of ECG Electrode (Adult) Qty 9,000 packs of 50, Diathermy Electronic Pencil Qty 34,000, Autoclave Tapes Qty 9,000 packs through Restricted Tendering	11,702,400	Worldbank	National Restricted Tendering
Procurement of 15No. Laptops, 2No. Industrial Scanner, 10No. Printers, 1No. Photocopier, 10No. External Hard drives and set of Tonners for Project Implementation Unit	110,455	Worldbank	Request for Quotation (RFQ)
Remodeling, Renovation and Furnishing of an existing old Documents Storage Facility at the Old Ministry of Health Procurement & Supply Chain Office at the National Ambulance Service Premises through Request for Quotation	368,607	Worldbank	Request for Quotation (RFQ)
Supply and Installation of Medical Equipment for the New Wajja Gbawe Pediatric Hospital through National Restrictive Tendering	5,000,000	Worldbank	National Restricted Tendering
Supply, Installation and Training of Theatre Equipment for Regional and District Hospitals through Restricted Tendering	8,776,800	Worldbank	National Restricted Tendering
Procurement of Psychotherapeutic Medicines	5,000,000	GoG	National Competitive Tendering
Provision for Equipment for Unequipped Holding, Treatment and Isolation Centres (Asawinso, Goaso, Cape Coast)	37,797,636	Worldbank	Single Source Tendering
Supply, Transport, Install, Commission and Train: 5 Unit 80Nm3-120nm3 capacity Oxygen Generators for High Volume Tertiary and Secondary Facilities	58,512,000	Worldbank	National Restricted Tendering
Re-equipping 40 District Hospitals with Laboratory, Medical and Surgical Equipment through Restricted Tendering	58,512,000	Worldbank	National Restricted Tendering

Procurement Contract Package	Estimated Amount (GHS)	Source of Funds	Procurement Method
Procurement of 1,000 Coveralls, 2,000 packs of 100 of Hair Covers 4,000 Waterproof Aprons, 1,000 Lab Coats, 1,500 Bedsheets, 40,000 Surgical face Shield	10,239,600	Worldbank	National Restricted Tendering
Procure 20 Cross Country Vehicle for Teaching and Regional Hospitals and MOH HQ Restricted Tendering	27,061,800	Worldbank	National Restricted Tendering
Procurement of 25,000 Packs of Surgical Gloves through Restricted Tendering	7,314,000	Worldbank	National Restricted Tendering
Supply and Installation of Ventilators, ICU Monitors, Anesthesia Machine etc at Tamale Teaching Hospital through Restricted Tendering	4,388,400	Worldbank	National Restricted Tendering
Procurement of Essential Medicines (Anti-Malaria and Antiretroviral Drugs)	33,702,000	Worldbank	Single Source Tendering
Supply and Installation of Virology Laboratory for the 37 Military Hospital through Restricted Tendering	6,582,600	Worldbank	National Restricted Tendering
Procurement of 5000 Racks of 96 Sterile Pipette Tips 10ul, 1ul etc., 20 Unit power board for Browner X-ray Machine, 30 Units FPD battery for Browner Machine	5,851,200	Worldbank	National Restricted Tendering
Procurement of 50 Units pick-ups (46 pick-ups for Health Centres of at least 80km radius from Regional Hospitals and 4 Pick-up	44,469,120	Worldbank	National Restricted Tendering
Supply and Installation of Medical Equipment Paediatric Clinic at Weija-Gbawe Municipal Hospital Greater Accra through Restricted Tendering	29,256,000	Worldbank	National Restricted Tendering
Construction of Classroom Block at Asafo NTC	8,500,000	NHIA	National Competitive Tendering
Procurement of 900 Unit Motorbikes for the sub-district, and CHPS zones through Restricted Tendering	28,085,760	Worldbank	National Restricted Tendering
Procurement of 15,000 packs of 5 pairs Gynecological Gloves through Restricted Tendering	23,403,600	Worldbank	National Restricted Tendering
Completion of Nsawora Health Centre in the Sefwi Akontombra District through National Restricted Tendering	2,000,000	GOG+ABFA	National Restricted Tendering
Completion of Wards, CSSD & Laundry, Theatre, Mortuary and Block of Flats for Akatsi District Hospital through National Restrictive Tendering	1,000,000	GOG+ABFA	National Restricted Tendering

Procurement Contract Package	Estimated Amount (GHS)	Source of Funds	Procurement Method
Completion and equipping of Pankrono Health Centre through National Restricted Tendering	2,000,000	GOG+ABFA	National Restricted Tendering
Completion of the remaining 4No of Housing Component under the Major Rehabilitation and Upgrading of Tamale Teaching Hospital Housing Project Phase II	4,500,000	GOG+ABFA	National Restricted Tendering
Supply and Installation of Equipment for Treatment Centre in selected facilities	60,000,000	GOG+ABFA	National Restricted Tendering
Supply and Installation of Equipment for CHPS Compounds of initiated in 2018/2019 and other specialised hospital facilities	20,000,000	GOG+ABFA	National Restricted Tendering
Procurement of 3No. Colour Printers, 2No. Scanners and 3No. Paper Shredder for General Administration	50,000	GOG	Request for Quotation (RFQ)
Procurement of 3No. Colour Printers, 2No. Scanners and 3No. Paper Shredder for General Administration	64,000	GOG	Request for Quotation (RFQ)
Procurement of 2No. Desktop Computer, 1No. Laptop Computer and 1No. Printer for Estate Management Unit	53,000	GOG	Request for Quotation (RFQ)
Procurement of Outer Covers (Tyres) for the Ministry of Health Headquarters through National Competitive Tendering	583,000	GOG	National Competitive Tendering
Procurement of 60No. Car duster, 100No. Vehicle stickers, 100No. Vehicle reflectors and 80No. Vehicle floor mats for Ministry of Health Headquarters	84,000	GOG	Request for Quotation (RFQ)
Procurement of 2No. Desktop Computer, 3No. Laptop Computer and 2No. Scanners for Records Unit	96,000	GOG	Request for Quotation (RFQ)
Procurement of 2No. Desktop Computer, 1No Printer and 1No. Scanner for Protocol Unit	94,000	GOG	Request for Quotation (RFQ)
Procurement of 2no. Desktop Computer, 1No. Laptop Computer 2No. 3 in 1 Printer and Double Door Fridge for Personnel Welfare Management Unit	95,000	GOG	Request for Quotation (RFQ)
Procurement of assorted toners for General Stores of the Ministry of Health Headquarters	958,000	GOG	National Competitive Tendering
Procurement of assorted stationeries for the Ministry of Health Headquarters General Stores through National Competitive Tendering	300,000	GOG	National Competitive Tendering

Procurement Contract Package	Estimated Amount (GHS)	Source of Funds	Procurement Method
Procurement of Car Batteries for 1st and 2nd Quarters for Ministry of Health Headquarters	98,000	GOG	Request for Quotation (RFQ)
Procurement of Car Batteries for 3rd and 4th Quarters for Ministry of Health Headquarters	98,000	GOG	Request for Quotation (RFQ)
Procurement of 2No. Laptop computers for staff of the General Stores	70,000	GOG	Request for Quotation (RFQ)
Procurement of 3No. Desktop Computers for the Procurement Unit of Procurement and Supply Chain Directorate of Ministry of Health Headquarters.	98,800	GOG	Request for Quotation (RFQ)
Procurement of 3No. Laptop Computers for the Procurement Unit of Procurement and Supply Chain Directorate of Ministry of Health Headquarters.	97,800	GOG	Request for Quotation (RFQ)
Procurement of 10No Swivel Chairs for IAU, Ministry of Health Headquarters	70,000	GOG	Request for Quotation (RFQ)
Procurement of 3N Laptop Computers for IAU, Ministry of Health Headquarters	98,000	GOG	Request for Quotation (RFQ)
Procurement of Vehicles, 2No Pick-Ups for IAU, Ministry of Health Headquarters	1,400,000	GoG	National Competitive Tendering
Procurement of 3No Laptop Computers for IAU, Ministry of Health Headquarters	98,000	GOG	Request for Quotation (RFQ)
Procurement of 1No All in One Desktop Computer, 2No Laptop Computers and 1No scanner for IAU, Ministry of Health Headquarters	97,800	GOG	Request for Quotation (RFQ)
Procurement of 1No Fridge, 1No shredder, 1No Projector, 1No comb binder and 5 each set of relevant laws for the IAU,	99,000	GOG	Request for Quotation (RFQ)
Maintenance and retooling of selected health facilities including Saltpond Elimina, Bechem, Cape Coast Metropolitan Hospital	12,333,871	GOG+ABFA	National Restricted Tendering

Annex 4: BUDGET

Annex 4a Trends in Health Share of Total Government Expenditure, 2019 – 2024

	2020	2021	2022	2023	2024
MOH	6,587,092,478	8,533,590,233	10,996,595,000	15,944,536,813	15,577,237,278
TOTAL MDA	44,741,858,203	48,058,278,721	85,853,820,000	91,359,502,159	90,967,751,977
TOTAL GOVERNMENT BUDGET (TGB)	98,036,692,349	129,032,804,203	145,472,323,000	227,805,332,781	259,052,474,750
MOH share of total MDAs	14.72%	17.76%	12.81%	17.45%	17.1%
MOH share of TGB	6.72%	6.61%	7.56%	7.00%	6.0%
Abuja Target	15.00%	15.00%	15.00%	15.00%	15.0%

Annex 4b Year-on-Year budget change

Source of Funds	2023 (GHC)	2024 (GHC)	Percentage change
GoG	9,000,023,677	10,927,716,634	21.42%
IGF	3,886,926,154	4,045,975,845	4.09%
Donor	2,996,539,520	603,544,799	-79.86%
ABFA	61,047,462	-	-
TOTAL	15,944,536,813	15,577,237,278	-2.30%

NB: In 2024 there was no allocation for ABFA

Annex 4c: Budget Annual % Change by Economic Classification

Source of Funds	2023 (GHC)	2024 (GHC)	Percentage change
GoG	9,000,023,677	10,927,716,634	21.42%
<i>Compensation</i>	8,900,715,972	10,709,685,455	20.32%
<i>Goods & Service</i>	23,853,476	73,031,179	206.17%
<i>Capex</i>	75,454,229	145,000,000	92.17%
ABFA	61,047,462	-	-
IGF	3,886,926,154	4,045,975,845	4.09%
<i>Compensation</i>	524,096,512	568,551,044	8.48%
<i>Goods & Service</i>	2,790,770,640	3,026,123,356	8.43%
<i>Capex</i>	572,059,002	451,301,445	-21.11%
Donor	2,996,539,520	603,544,799	-79.86%
<i>Goods & Service</i>	277,937,800	477,835,750	71.92%
<i>Capex</i>	2,718,601,720	125,709,049	-95.38%
Total	15,944,536,813	15,577,237,278	-2.30%

Annex 4d: Breakdown of 2024 Budgetary Needs

Item	GoG	IGF	Donor	Total Need	2024 Provision	Gap
Compensation	12,100,146,635	657,546,544	-	12,757,693,179	11,278,236,499	1,479,456,680
Goods & Service	1,226,980,534	3,318,175,090	477,835,750	5,022,991,374	3,576,990,285	1,446,001,089
Capex	6,726,994,014	823,277,360	125,709,049	7,675,980,423	722,010,494	6,953,969,929
Total	20,054,121,183	4,798,998,994	603,544,799	25,456,664,976	15,577,237,278	9,879,427,698

Annex 5: Possible Additional Budget (Off-Budget)

Donor	Focus Area	Projected for 2024 USD (\$)
UNICEF	Quality service delivery	1,858,816
	Governance and financing	929,408
	Environmental Health	522,792
	Emergency Preparedness	638,968
	Data quality and evidence generation	697,056
	Digital Health	12,750
UNDP	Primary Health Care Networks of Practice and Model Health Centers are developed	2,909,867
	Capacities, Accountability and Quality of Networks of Practice improved	971,333
	Health Policies, Standards and Plans developed and Financing for Primary Health Care is improved	1,547,417
	National Health Insurance Scheme Coverage is expanded and Financing for Primary Health Care Services is prioritized	1,431,167
	Public Financial Management for Primary Health Care Services is improved	321,367
GFF	Improved Utilization of Selected Primary Health Care Services	568,850
	Technical support for various areas	530,000

Donor	Focus Area	Projected for 2024 USD (\$)
JICA	Service Delivery	6,033,333
KOFIH	National Health Insurance Policy Cooperation	225,000
	Strengthening for Biomedical Engineering System in Ghana	789,000
	Establishment of Laparoscopic Surgery Training Center in Cape Coast Teaching Hospital	150,000
	Improving the rehabilitation services for children with disabilities	700,000
KOICA	Dr. LEE Jong-wook Fellowship Program	600,000
	Global Health Security	2,173,913.04
	Health Systems Strengthening	2,695,652.17
	Diagnostic Services	500,000.00
USAID (SEND Ghana, JHPIEGO, FHI 360, R4D)	General Health Systems Strengthening	4,298,676.52
	HIV Viral Hepatitis & STIs	702,483.33
	Water, Sanitation, and Hygiene	2,297,556.54
	Nutrition	858,149.17
	Malaria	1,942,166.67
	Family Planning	716,666.67
	Reproductive Maternal Newborn Child Health	483,333.33
	Global Health Security	650,166.67
	Quality Assurance of manufactured Drugs	41,666.67
	Health Technology Assessment (Priority setting)	31,000
NORAD	Health Systems Strengthening	800,000
	Operational Research	371,429
France	Access to quality health services	225,000
	Strengthened surveillance support for the control and elimination of Malaria and Neglected Tropical Diseases.	50,000
	Health Governance	100,000
	1. Support the strengthening of HRH Regulatory Capacity; 2. Support the strengthening of HWF leadership and governance capacity; 3. Support the scaling up of education and training of HWF; 4. Support the strengthening of HWF dialogue and Partnerships	250,000

Donor	Focus Area	Projected for 2024 USD (\$)
	<p>1.Support the implementation of the National Health Financing Strategy, including Pro-health taxes and the assessment of progress with health financing systems and reforms (using the Health Financing Progress Matrix tool); Support Fiscal space for health interventions, including cross-cutting work across diseases and conditions, and health issues across populations across the life course; 3.Support strategic purchasing/provider payment, cross-programmatic efficiency analysis, Social protection, Health insurance schemes, and other pre-payment mechanisms; and 4. Support the implementation of the PFM strategy for the health sector</p>	250,000
	<p>1.Support the monitoring of forgone care and unmet need for service ; 2. Support the monitoring and analysis of financial protection (including household survey analysis, measurement of SDG indicator 3.8.2); and 3. Support the conduct of national health accounts, using classifications from A system of health accounts, 2011: revised edition – tracking indicators of catastrophic and impoverishing out-of-pocket payments</p>	120,115
	<p>1. Support evidence-informed decisions, through fair and transparent processes, about what services to provide or finance and the necessary health system investments for implementation ; 2. Support Costing, Cost-effectiveness analysis and benefit package design, including Investment case for the health sector; and 3. Support Impact assessment of universal health coverage and health on economic performance, policies that maximize the contribution of the health sector to the economy .</p>	24,885
	Regulatory Capacity for assuring high quality, safe and effective health products and technologies strengthened	171,500
	Local production of health product capacities increased	100,020
	National capacity in combating SF are strengthened	125,000
	Policies and systems to tackle antimicrobial use and resistance	155,000
	Health Emergency preparedness	655,000
	Epidemics and Pandemic preparedness	265,500
	Disease surveillance and Public Health Emergency Response	109,200
	Social, and economic determinants of health	80,000
	Healthier populations	20,000
	Environmental determinants of health	80,000
	Health Information Services	450,000
	Social Determinants of Health	50,000
	Polio Eradication	120,000
	Tobacco Control	30,000

Donor	Focus Area	Projected for 2024 USD (\$)
World Bank	Primary Health Care Networks of Practice and Model Health Centres are 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 is improved	7,487,500
	National Health Insurance Scheme Coverage is expanded and Financing for Primary Health Care Services is prioritized	6,925,000
	Public Financial Management for Primary Health Care Services is improved	1,555,000
	Improved Utilization of Selected Primary Health Care Services	2,752,500
Total		80,931,203